Fill in this information to identify your case:		MONTHE.
United States Bankruptcy Court for the:		OCT DA 2011
Northern District of Illinois		MINTEADT, CLEIN
Case number (If known):	Chapter you are filing under: ☑ Chapter 7 ☐ Chapter 11	JEFFREY P. ALLSTEADT, CLERK
	Chapter 12 Chapter 13	Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Leament .	Identity	Yourself
		The text of the te

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1,	Your full name		
	Write the name that is on your	Tavares	
	government-issued picture identification (for example,	First name	First name
	vour driver's license or	D.	(dat ranto
	passport).	Middle name	Middle name
	Bring your picture	Griffin	
	identification to your meeting with the trustee.	Last name	Last name
		Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
2.	All other names you	Same-as-above	
	have used in the last 8 years	First name	First name
	Include your married or maiden names.	Middle name	Middle name
		Last name	Last name
		First name	First name
		Middle name	Middle name
		Last name	Last name
3.	Only the last 4 digits of		
	your Social Security	xxx - xx - <u>1 6 9 6</u>	xxx - xx
	number or federal	OR	OR
	Individual Taxpayer	0	
	Identification number	9 xx - xx	9 xx - xx

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Deb	otor 1 Tavares D	. Griffin	PROGRAMMA AND AND AND AND AND AND AND AND AND AN	Case number (if known)	
		About Debtor 1:		About Debtor 2 (Spouse Only in a Joint Case):	
	Any business names and Employer Identification Numbers (EIN) you have used in	☑ I have not used any bus	siness names or EINs.	☐ I have not used any business names or EINs.	
,	the last 8 years	Business name	***************************************	Business name	
	doing business as names	Business name		Business name	
		EIN		EIN	
		EIN	- VPSOPONA ANESONA Arramon	EIN	
5. \	Where you live	. 8. (.,,	If Debtor 2 lives at a different address:	
		219 Zuelke Drive Number Street		Number Street	
		Bellwood City	IL 60104 State ZIP Code	City State ZIP Cod	de
		Cook County		County	
		If your mailing address is above, fill it in here. Note t any notices to you at this ma	hat the court will send	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.	
		Number Street		Number Street	
		P.O. Box		P.O. Box	_
		City	State ZIP Code	City State ZIP Cod	le
Ĺ	Vhy you are choosing his district to file for ankruptcy	Check one: Over the last 180 days by I have lived in this district	efore filing this petition,	Check one: Over the last 180 days before filing this petition,	
		other district. I have another reason. E (See 28 U.S.C. § 1408.)	•	I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)	
					_

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D	ebtor 1	Tavares First Name	D. Middle Name	Griffin Last Name			Case number (if	known)		
Dokum										
;	Part 2: 1	ell the Court	About Your	Bankrupte	cy Case	NOTE OF THE PARTY	W000017004644444			
7.	Bankru	pter of the otcy Code you	Check u for Ban	one. (For a kruptcy (Fo	brief description rm 2010)). Als	on of each, see Not o, go to the top of p	tice Required by 1 page 1 and check t	1 U.S.C. § 342(b) for Individuals Filing the appropriate box.		
	are cho- under	osing to file		hapter 7						
	unuo;		☐ Cha	apter 11						
			☐ Cha	apter 12						
			☐ Cha	apter 13						
8.	How you	ı will pay the	loca you sub with I ne App	al court for rself, you a mitting you a pre-prired to pay elication for the pay quest that	more details may pay with ar payment of address. the fee in in a land and a land and a land	about how you recash, cashier's an your behalf, you stallments. If you have been been been been been been been be	may pay. Typical check, or money ur attorney may bu choose this of Fee in Installment request this opt	eck with the clerk's office in your ly, if you are paying the fee order. If your attorney is pay with a credit card or check potion, sign and attach the ents (Official Form 103A).		
9.	Have yo	u filed for	less pay <i>Cha</i>	than 1509 the fee in	% of the offici installments)	al poverty line th . If you choose th	at applies to you nis option, you m	and may do so only if your income is ar family size and you are unable to sust fill out the Application to Have the with your petition.		
	bankrup last 8 ye	uptcy within the	!	District		When		Case number		
	-						MM / DD / YYYY			
				District	PA-14-14-14-14-14-14-14-14-14-14-14-14-14-	When	MM / DD / YYYY	Case number		
				District	······································		MM / DD / YYYY	Case number		
10.	Are any	pankruptcy	☑ No							
	filed by a	nding or beir spouse who	is Yes.	Debtor			······································	Relationship to you		
you, or		ing this case with or by a business er, or by an	th	District		When	MM / DD / YYYY	Case number, if known		
	armuto:			Debtor				Relationship to you		
								Case number, if known		
11.	Do you re residence		☑ No. ☑ Yes.	Go to line Has your la residence?	andlord obtaine	ed an eviction judgi	ment against you a	and do you want to stay in your		
				🛭 No. Go	to line 12.					
				Yes. Fi	II out <i>Initial Sta</i> nkruptcy petitio	atement About an E on.	Eviction Judgment	Against You (Form 101A) and file it with		

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Debtor 1	Tavares	D. Ile Name	Griffin Last Name		Case nu	imber (if known)	
- A	Paramet Street S						
Part 3:	Report About Al	ny Busines	ses You Own as a S	iole Propr	ietor		CHANGE AND
of any	ou a sole propriet full- or part-time		Go to Part 4.				
busin A sole	ess? proprietorship is a	↓ Yes	s. Name and location of	business			
busines individu separat	proprietorship is a ses you operate as an ual, and is not a te legal entity such a pration, partnership, o	s	Name of business, if any				
If you h	ave more than one oprietorship, use a						
separat to this p	e sheet and attach it	t					
10 4113 ‡	Cutton.		City			State	ZIP Code
			Check the appropriate	box to desc	ribe your business:		
			Health Care Busine	ess (as defin	ned in 11 U.S.C. § 10)1(27A))	
			☐ Single Asset Real	Estate (as de	efined in 11 U.S.C. §	101(51B))	
			Stockbroker (as de	fined in 11 L	J.S.C. § 101(53A))		
			Commodity Broker	(as defined	in 11 U.S.C. § 101(6	5))	
			☐ None of the above				
Chapte Bankru are you debtor For a de busines	u filing under er 11 of the uptcy Code and u a small busines? finition of small s debtor, see C. § 101(51D).	most re any of the No.	appropriate deadlines. I cent balance sheet, stat nese documents do not I am not filing under Ch	f you indicat ement of ope exist, follow apter 11.	e that you are a sma erations, cash-flow s the procedure in 11	ill business tatement, a U.S.C. § 11	mall business debtor so that it debtor, you must attach your nd federal income tax return or if 16(1)(B).
		🔲 Yes.	Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.				
Pant 4:	Report if You Ow	n or Have	Any Hazardous Pro	erty or A	ny Property That	Needs In	nmediate Attention
	own or have any						
alleged of immi identifia public l Or do y	y that poses or is to pose a threat inent and able hazard to nealth or safety? ou own any	Yes.	What is the hazard?	***************************************			
	y that needs ate attention?		If immediate attention	is needed, w	vhy is it needed?		
perishabi that musi	nple, do you own le goods, or livestoch t be fed, or a building Is urgent repairs?			***************************************	***************************************		
			Where is the property?	Number	Street	······································	
				M-1		·····	
				City		······································	State ZIP Code

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Tavares	D. Middle Name	Griffin Last Name	Case number (if known)
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Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

l am	not	require	d to	receive	a	briefing	about
cred	it cc	unselir	ia b	ecause	of	:	

I incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability. My physical disability causes me

to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

_	I am not required to receive a briefing about
	credit counseling because of:

Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I

reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Debtor 1 1 AVAI CS L First Name Middle N	J. Griffin ame Last Name	Case number (# k	nown)				
	•						
Pari 63 Answer These Que	estions for Reporting Purp	oses	ANNO MARKET PROPERTY AND				
16. What kind of debts do you have?	as incurred by an indivi	narily consumer debts? Consumer de dual primarily for a personal, family, or hou	bts are defined in 11 U.S.C. § 101(8) usehold purpose."				
•	No. Go to line 16b. Yes. Go to line 17.						
	money for a business of	arily business debts? Business debts investment or through the operation of the	s are debts that you incurred to obtain business or investment.				
	☐ No. Go to line 16c. ☐ Yes. Go to line 17.						
	16c. State the type of debts y	ou owe that are not consumer debts or bu	siness debts.				

17. Are you filing under Chapter 7?	☐ No. I am not filing under						
Do you estimate that after any exempt property is	 Yes. I am filing under Cha administrative expen 	pter 7. Do you estimate that after any exer ses are paid that funds will be available to	npt property is excluded and				
excluded and administrative expenses	₩ No	administrative expenses are paid that funds will be available to distribute to unsecured creditors?					
are paid that funds will be available for distribution	Yes						
to unsecured creditors?							
18. How many creditors do	2 1-49	1 ,000-5,000	25,001-50,000				
you estimate that you owe?	☐ 50-99 ☐ 100-199	5,001-10,000 10,001-25,000	50,001-100,000				
en e	200-999		☐ More than 100,000				
19. How much do you estimate your assets to	2 \$0-\$50,000	☐ \$1,000,001-\$10 million	□ \$500,000,001-\$1 billion				
be worth?	\$50,001-\$100,000 \$100,001-\$500,000	\$10,000,001-\$50 million \$50,000,001-\$100 million	\$1,000,000,001-\$10 billion				
	□ \$500,001-\$1 million	\$100,000,001-\$500 million	\$10,000,000,001-\$50 billion More than \$50 billion				
20. How much do you	\$0-\$50,000	\$ 1,000,001~\$10 million	\$500,000,001-\$1 billion				
estimate your liabilities to be?	\$50,001-\$100,000 \$100,001-\$500,000	\$10,000,001-\$50 million	□ \$1,000,000,001-\$10 billion				
	\$500,001-\$500,000	\$50,000,001-\$100 million \$100,000,001-\$500 million	☐ \$10,000,000,001-\$50 billion☐ More than \$50 billion				
Parily 78 Sign Below		+ /	wore than \$50 billion				
For you	I have examined this petition, a correct.	and I declare under penalty of perjury that	the information provided is true and				
	If I have chosen to file under Ci of title 11, United States Code. under Chapter 7.	hapter 7, I am aware that I may proceed, it I understand the relief available under eac	f eligible, under Chapter 7, 11,12, or 13 ch chapter, and I choose to proceed				
	If no attorney represents me ar this document, I have obtained	nd I did not pay or agree to pay someone v and read the notice required by 11 U.S.C.	who is not an attorney to help me fill out § 342(b).				
	I request relief in accordance w	ith the chapter of title 11, United States Co	ode, specified in this petition.				
	I understand making a false sta with a bankruptcy case can res 18 U.S.C. §§ 152, 1341, 1519,	atement, concealing property, or obtaining ult in fines up to \$250,000, or imprisonmer and 357 ₄ .	money or property by fraud in connection of for up to 20 years, or both.				
	x Taron &	rich x	oon Sipi				
	Signature of Debtor 1	Signature	of Debtor 2				
	Executed on MM / DD /	YYYY Executed	on 10 3 11				

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			200	cament rager	01 02
Debtor 1	Tavares	D.	Griffin Last Name	Distriction and the state of th	Case number (# known)
bankrupto attorney	you are filing y without an		should understa themselves suc	and that many people fin cessfully. Because bank	oresent yourself in bankruptcy court, but you not it extremely difficult to represent cruptcy has long-term financial and legal to hire a qualified attorney.
an attorne	represented bey, you do not le this page.	У	To be successful, technical, and a m dismissed because hearing, or cooper firm if your case is	you must correctly file and nistake or inaction may affect be you did not file a required rate with the court, case trust selected for audit. If that has	handle your bankruptcy case. The rules are very ct your rights. For example, your case may be document, pay a fee on time, attend a meeting or stee, U.S. trustee, bankruptcy administrator, or audit appens, you could lose your right to file another he benefit of the automatic stay.
			in your schedules. property or property also deny you a discase, such as dest cases are randomi	plan to pay a particular deb If you do not list a debt, the ly claim it as exempt, you m ischarge of all your debts if y troying or hiding property, fa ly audited to determine if de	e schedules that you are required to file with the t outside of your bankruptcy, you must list that debt e debt may not be discharged. If you do not list hay not be able to keep the property. The judge can expou do something dishonest in your bankruptcy alsifying records, or lying. Individual bankruptcy exports have been accurate, truthful, and complete.
			If you decide to file hired an attorney. successful, you mu Bankruptcy Proced	e without an attorney, the co The court will not treat you c ust be familiar with the Unite	ourt expects you to follow the rules as if you had differently because you are filing for yourself. To be ed States Bankruptcy Code, the Federal Rules of he court in which your case is filed. You must also
			consequences?	t filing for bankruptcy is a se	erious action with long-term financial and legal
			☐ No ☑ Yes		
			Are you aware that inaccurate or incom No Yes	t bankruptcy fraud is a serio nplete, you could be fined o	us crime and that if your bankruptcy forms are r imprisoned?
			Did you pay or agre No Yes. Name of Pe	erson Tania Stoxstell	not an attorney to help you fill out your bankruptcy forms? otice, Declaration, and Signature (Official Form 119).
		*	By signing here, I an have read and under attorney may cause Signature of Debtor 1 Date MM / DE Contact phone	erstood this notice, and I ame to lose my rights or pro	nd the risks involved in filing without an attorney. I have a second and a second a

Email address

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Debtor 1	Tavares	D.	Griffin	
	First Name	Middle Name	Last Name	Notes (
Debtor 2 Spouse, if filing)	First Name	Middle Name	Last Name	
United States I	Bankruptcy Court for	the: Northern District of I	llinois	
Case number				☐ Check if this is
	(If known)			amended filing
				autorossuurud
.ce: . :	4000			
micial F	Form 106S	um		
1 1000 AND 42 II	ne në Varre	Acceto and Fi		ertain Statistical Information 12/1
		AARTER EN PRINCE LA	BENEROUS PROUG	ertain Statistical Intormation 12/1

your original forms, you must fill out a new Summary and check the box at the top of this page.

Part 13: Summarize Your Assets	
	Your assets Value of what you own
Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$ 0.00
ia. Copy line 55, Total real estate, Itom Scriedule A/B	
1b. Copy line 62, Total personal property, from Schedule A/B	\$800.00
1c. Copy line 63, Total of all property on Schedule A/B	\$800.00
Part 2: Summarize Your Liabilities	MONICO COLO COLO COLO COLO COLO COLO COLO C
	Your liabilities Amount you owe
 Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D 	\$16,742.00
3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)	s 0.00
3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	+ \$ 12,498.00
Your total liabilities	\$29,240.00
Part 33 Summarize Your Income and Expenses	
4. Schedule I: Your Income (Official Form 106I)	s 2,074.00
Copy your combined monthly income from line 12 of Schedule I	\$\$
5. Schedule J: Your Expenses (Official Form 106J)	¢ 3,105.00
Copy your monthly expenses from line 22c of Schedule J	. \$ 0,100.00

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Del	btor 1	Tavares First Name	Middle Name	D		riffin	Case number (if known)			
Pa	art 4:			_{Last Na} ons for Adr		and Statistical	Records			
6.	Are you	u filing for bank	cruptcy unc	ier Chapters	s 7, 11, or 13?					
	No. Yes	You have nothin	ng to report	on this part o	of the form. Chec	ck this box and su	ubmit this form to the court with yo	our othe	er schedules.	
7.	What ki	nd of debt do y	ou have?							
	Q You fami	or debts are prinilly, or household	marily cons f purpose."	umer debts I1 U.S.C. § 1	. Consumer deb 101(8). Fill out lin	ets are those "incu nes 8-9g for statis	erred by an individual primarily for tical purposes. 28 U.S.C. § 159.	a perso	onal,	
	You this	r debts are not form to the cour	t primarily of t with your o	consumer de other schedul	ebts . You have r les.	nothing to report o	on this part of the form. Check this	s box ar	nd submit	
	Erom th	na Statamant at	F Value Comm		. t		the same and same as			
D .	Form 12	22A-1 Line 11; O	OR, Form 12	ent Monthly 2B Line 11; (OR, Form 122C-	our total current i -1 Line 14.	monthly income from Official		\$3,044.00	-
								'		
€.	Copy the	e following spe	ocial catego	ories of clain	ms from Part 4,	line 6 of Schedu	ele E/F:			
							Total claim			
	From I	Part 4 on Schei	dule E/F, co	ppy the follo	wing:					
	9a. Dom	estic support ob	oligations (C	opy line 6a.)			\$	0.00		
	9b. Taxe	es and certain ot	her debts yo	ou owe the g	overnment. (Cop	py line 6b.)	\$	0.00		
	9c. Clain	ns for death or p	ersonal inju	ry while you	were intoxicated	d. (Copy line 6c.)	\$	0.00		

9e. Obligations arising out of a separation agreement or divorce that you did not report as

9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)

9d. Student loans. (Copy line 6f.)

priority claims. (Copy line 6g.)

9g. Total. Add lines 9a through 9f.

0.00

0.00

0.00

0.00

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Fill in this	s information to identify y	our case and this	filling)						
Debtor 1 Debtor 2 (Spouse, if file	Tavares D. First Name First Name	Griff Middle Name Middle Name	Last Name						
İ	es Bankruptcy Court for the: N	orthern District of I	llinois						
Case numb	al Form 106A/B		***************************************			Check if this is an amended filing			
Sch	edule A/B: I	Property	y			12/15			
category responsi	In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.								
Parier Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In									
🗹 No.	own or have any legal or Go to Part 2. where is the property?	equitable interes		building, land, or similar pro	perty?	ence and the control of the control			
			wnat is the prop	erty? Check all that apply.	Do not deduct	secured claims or exemptions. But			

Yes. Where is the property? 1. Street address, if available, or other description	What is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land	the amount of any secur- Creditors Who Have Clar Current value of the entire property?	Current value of the portion you own?
	Land Investment property	\$ 0.00	\$
City State ZIP Code	Timeshare Other	Describe the nature interest (such as fee the entireties, or a life	simple, tenancy by
	Who has an interest in the property? Check one.	or	o course, a known.
County	☐ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	Check if this is co	ommunity property
ou own or have more than one, list here:	Other information you wish to add about this it property identification number:	em, such as local	
2. Street address, if available, or other description	What is the property? Check all that apply. Single-family home Duplex or multi-unit building	Do not deduct secured cl the amount of any secure Creditors Who Have Clair	d claims on Schedule D:
oriest address, if available, or other description	Condominium or cooperative Manufactured or mobile home	Current value of the entire property?	Current value of the portion you own?
	Land	\$0.00	\$ 0.00
City State ZIP Code	Investment property Timeshare Other	Describe the nature of interest (such as fee the entireties, or a life	simple, tenancy by
	Who has an interest in the property? Check one.		
County	Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	Check if this is co	mmunity property
	Other information you wish to add about this item property identification number:	n, such as local	

Debtor 1		D. Grif	Document Page 11 of 52 Case number (#	f known)	
1.3.	Street address, if availab	ole, or other description State ZIP Code	What is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other	the amount of any secur Creditors Who Have Cla Current value of the entire property? \$ 0.00 Describe the nature interest (such as fee	simple, tenancy by
	County		Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Other information you wish to add about this ite	Check if this is constructions)	-
2. Add ti	he dollar value of the	nortion you own for a	property identification number: Il of your entries from Part 1, including any entrie		\$ 0.00
	Describe Your	Vahiciae			
Do you o you own t	that someone else drive	gal or equitable interes	st in any vehicles, whether they are registered or a second or sec	not? Include any vehicle and Unexpired Leases.	S
Do you o you own t	own, lease, or have leg that someone else drive vans, trucks, tractors	gal or equitable interes es. If you lease a vehicle	e, also report it on Schedule G: Executory Contracts	not? Include any vehicle and Unexpired Leases.	S
Oo you o you own t 3. Cars, O No 50 Ye 3.1.	own, lease, or have leg that someone else drive vans, trucks, tractors	gal or equitable interes es. If you lease a vehicle	e, also report it on Schedule G: Executory Contracts	not? Include any vehicle and Unexpired Leases. Do not deduct secured class the amount of any secure Creditors Who Have Clair Current value of the entire property?	aims or exemptions. Put d claims on <i>Schedule D:</i> ns Secured by <i>Prope</i> rty.
Oo you o you own t 3. Cars, O No 50 Ye 3.1.	wwn, lease, or have leg that someone else drive vans, trucks, tractors o es Make: Model: Year:	pal or equitable intereses. If you lease a vehicle part utility vehicles. Dodge Charger 2013	who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Do not deduct secured clathe amount of any secure Creditors Who Have Clair Current value of the	aims or exemptions. Put d claims on <i>Schedule D:</i> ns Secured by Property. Current value of the
Do you o you own t 3. Cars, Q Ye 3.1.	wn, lease, or have legathat someone else driver vans, trucks, tractors of the session of the ses	pal or equitable intereses. If you lease a vehicle s, sport utility vehicles. Dodge Charger 2013 12,000	who has an interest in the property? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this is community property (see	Do not deduct secured class the amount of any secure Creditors Who Have Clair Current value of the entire property?	aims or exemptions. Put d claims on Schedule D: ns Secured by Property. Current value of the portion you own?
If you a	wn, lease, or have legathat someone else drive vans, trucks, tractors of the session of the sess	pal or equitable intereses. If you lease a vehicle s, sport utility vehicles. Dodge Charger 2013 12,000	who has an interest in the property? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this is community property (see	Do not deduct secured class the amount of any secure Creditors Who Have Clair Current value of the entire property?	aims or exemptions. Put d claims on Schedule D: ns Secured by Property. Current value of the portion you own? \$ 0.00 aims or exemptions. Put d claims on Schedule D:

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Griffin Page 12 of 52 D. Tavares Debtor 1 Case number ut know Who has an interest in the property? Check one Make: 3.3 Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Debtor 1 only Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Debtor 1 and Debtor 2 only Current value of the Current value of the entire property? Approximate mileage: portion you own? At least one of the debtors and another Other information: 0.00 Check if this is community property (see instructions) Who has an interest in the property? Check one. Make: Do not deduct secured claims or exemptions. Put Debtor 1 only the amount of any secured claims on Schedule D: Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Debtor 1 and Debtor 2 only Current value of the Current value of the entire property? portion you own? Approximate mileage: At least one of the debtors and another Other information: 0.00 0.00 Check if this is community property (see instructions) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories Z No Q Yes Who has an interest in the property? Check one. 4.1. Make: Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Debtor 1 only Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Debtor 1 and Debtor 2 only Current value of the Current value of the Other information: At least one of the debtors and another entire property? portion you own? Check if this is community property (see 0.00 0.00 instructions) If you own or have more than one, list here: Who has an interest in the property? Check one Make: Do not deduct secured claims or exemptions. Put Debtor 1 only the amount of any secured claims on Schedule D: Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Current value of the Current value of the Debtor 1 and Debtor 2 only entire property? portion you own? Other information: At least one of the debtors and another 0.00 0.00 Check if this is community property (see instructions) 5. Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages 0.00 you have attached for Part 2. Write that number here

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Debtor 1

Tavares First Name

D. Middle Name Griffin

Case number (if known)

Part 3:

Describe Your Personal and Household Items

Do	you own or have any legal or equitable interest in any of the following items?	Current val portion you Do not deduct or exemptions	own? secured claims
6.	Household goods and furnishings	** ***********************************	•
	Examples: Major appliances, furniture, linens, china, kitchenware		
	□ No		
	Yes. Describe Household Furniture	_	600.00
	Floadenoid Edinitare	\$	000.00
7.	Electronics		
	Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games		
	No Consider		
	Yes. Describe Cell Phone & TV	\$	200.00
^	Collectibles of the control of	.:	
ŏ.	Collectibles of value		
	Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles No		
	Yes. Describe		0.00
		\$	0.00
9.	Equipment for sports and hobbies		
	Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments		
	No		
	Yes. Describe	: \$	0.00
		· ·	
	Firearms		
	Examples: Pistols, rifles, shotguns, ammunition, and related equipment		
	No No	1	
	Yes. Describe	\$	0.00
	Diathers		
	Clothes Country of the Country of th		
	Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories 2 No		
	Yes. Describe		
	Tes. Describe	\$	0.00
12.	Jewelry		
	Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver		
	2 No		
	Yes. Describe	\$	0.00
13 🖡	Von-farm animals		
	Examples: Dogs, cats, birds, horses		
	2 No		
,	Yes. Describe	\$	0.00
14.	any other personal and household items you did not already list, including any health aids you did not list		
[2 No		
(Yes. Give specific		0.00
	information	\$	0.00
5. 4	Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached		
f	or Part 3. Write that number here	\$	800.00
	7		

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Debtor 1

D. **Tavares** First Name

Middle Name

Document Griffin

Case number (#known)

Part 4:

Describe Your Financial Assets

Do you own or have an	y legal or equitable interest in	any of the following?	Current va portion yo Do not dedu or exemption	u own? ct secured claim:
16. Cash Examples: Money you	u have in your wallet, in your ho	me, in a safe deposit box, and on hand when you file your petition		
2 No				
☐ Yes	······	Cash:	· \$	0.00
17. Deposits of money Examples: Checking, and other	savings, or other financial accorsimilar institutions. If you have n	unts; certificates of deposit; shares in credit unions, brokerage houses nultiple accounts with the same institution, list each.	s,	
2 Yes		Institution name:		
	17.1. Checking account:	Chase Bank	. \$ <u></u>	0.00
	17.2. Checking account:		\$	0.00
	17.3. Savings account:		. \$	0.00
	17.4. Savings account:		. \$	0.00
	17.5. Certificates of deposit:		. s	0.00
	17.6. Other financial account:		. s	0.00
	17.7. Other financial account:		s	0.00
	17.8. Other financial account:		\$	0.00
	17.9. Other financial account:		\$	0.00
	, or publicly traded stocks , investment accounts with brok Institution or issuer name:	erage firms, money market accounts		
			_ \$	0.00
	***************************************		- \$	0.00
			- \$	0.00
19. Non-publicly traded s	stock and interests in incorpo and joint venture	rated and unincorporated businesses, including an interest in		
2 No	Name of entity:	% of ownership:		
Yes. Give specific information about			\$	0.00
them		%	\$	0.00
			\$	0.00

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Page 15 of 52 Griffin D. **Tavares** Debtor 1 Case number (if known)_ First Name 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ☑ No Tes. Give specific Issuer name: information about 0.00 them..... 0.00 0.00 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans Z No Yes. List each account separately. Type of account: Institution name: 401(k) or similar plan: 0.00 0.00 Pension plan: 0.00 IRA: Retirement account: 0.00 0.00 Keogh: Additional account: 0.00 Additional account: 0.00 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others 2 No Q Yes..... Institution name or individual: Electric: 0.00 Gas: 0.00 Heating oil: 0.00 0.00 Security deposit on rental unit: ___ Prepaid rent: 0.00 Telephone: 0.00 Water: 0.00 Rented furniture: 0.00 Other: 0.00 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) Q No ☐ Yes..... Issuer name and description: 0.00

0.00 0.00 Case 17-29738 Doc 1 Filed 10/04/17 Entered 10/04/17 10:59:36 Desc Main

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Case number (# known)

Case number (# known)

24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.

24. Interests in an education II	RA, in an account in a qualified At	RI F program or under a qualified	l atata tultian and		
26 U.S.C. §§ 530(b)(1), 529	A(b), and 529(b)(1).	are program, or under a quaimed	state tuition progran	1.	
☑ No					
☐ Yes	 Institution name and description. 	Separately file the records of any in	nterests.11 U.S.C. § 52	1(c):	
	^ ^^			\$	0.00
	0.00			\$	0.00
				- \$	0.00
25. Trusts, equitable or future exercisable for your benefit	interests in property (other than a	nything listed in line 1), and right	s or powers		
Ø No					
Yes. Give specific		to the control of the second of the control of the	to the control of the		
information about them	•			\$	0.00
26 Patente convriente trada-	manta tuada manata and all the				
Examples: Internet domain n	narks, trade secrets, and other int ames, websites, proceeds from roya	ellectual property			
2 No	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	and the normality agreements			
☐ Yes. Give specific	And the second of the second o				
information about them				\$	0.00
27. Licenses, franchises, and o	other general intangibles exclusive licenses, cooperative asso-	aladian kakita a			
2 No	solutive licenses, cooperative asso-	ciation notatings, liquor licenses, pro	tessional licenses		
Yes. Give specific	the term of the te	the state of the s			
information about them				\$	0.00
		the second constitution			W-11
Money or property owed to you	u?			Current	value of the
				portion	vou own?
					duct secured exemptions.
28. Tax refunds owed to you					
2 No					
Yes. Give specific information		the contract of the second contract of the se	Federal:	œ.	0.00
about them, including you already filed the	g whether returns			P	0.00
and the tax years			State:	\$	0.00
			Local:	\$	0.00
29. Family support					
	um alimony, spousal support, child s	SUDDOM maintenance divorce settle	ment property cettlem	ant	
2 No	, , , , , , , , , , , , , , , , , , ,		ment, property settle(iii	C1 II	
Yes. Give specific informa	tion				
			Alimony:	\$	0.00
			Maintenance:	\$	0.00
			Support:	\$	0.00
		•	Divorce settlement:	\$	0.00
			Property settlement:	\$	0.00
30. Other amounts someone ow	es you				
Examples: Unpaid wages, disa Social Security ber	ability insurance payments, disability nefits; unpaid loans you made to son	benefits, sick pay, vacation pay, w	orkers' compensation,		
☑ No	, , ,				
Yes. Give specific informat	ion	the section of the se			
				\$	0.00

Griffin Page 17 of 52 Tavares D. Debtor 1 Case number (if known) 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance Z No Yes. Name the insurance company Company name: Beneficiary: Surrender or refund value: of each policy and list its value... 0.000.00 0.00 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. 2 No Yes. Give specific information..... 0.00 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue Yes. Describe each claim. 0.00 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims 21 No Yes. Describe each claim..... 0.00 35. Any financial assets you did not already list Z No Yes. Give specific information...... 0.00 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here 0.00Part 51 Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? 2 No. Go to Part 6. Yes. Go to line 38. Current value of the portion you own? Do not deduct secured claims or exemptions. 38. Accounts receivable or commissions you already earned **2** No Yes. Describe..... 0.00 39. Office equipment, furnishings, and supplies Examples: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices 2 No ☐ Yes. Describe...... 0.00

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Debtor 1				ocument	Page 18 of 52 Case number (if known)		
	First Name	Middle Name	Last Name				
40 Mach	inarı firturan	o merimum a ma					
40. Waci		, equipment,	supplies you use	in business, and i	tools of your trade		
	io 'es. Describe				$(x,y) \in \mathcal{C}_{p_{1}}(\mathbb{R}^{n}) \times \mathcal{C}_{p_{2}}(\mathbb{R}^{n}) \times \mathcal{C}_{p_{2}$		
		•••				\$	0.00
41. Inver	tam.						
Q N	-						
□ Y	es. Describe					\$	0.00
	sts in partner	ships or joint	ventures				
20 N	0 As Dascriba						
-	es. Describe	· Name of e	ntity:		% of ownership.		
					<u>%</u>	\$	0.00
					%	\$	0.00
_						Ψ	
43. Custo		ing lists, or o	other compilations	3	•		
		s include pe	rsonally identifiab	le information (as	defined in 11 U.S.C. § 101(41A))?		
	☐ No			-	• (", "		
	Yes. De:	scribe				¢	0.00
						Ψ	
44. Any b		d property ye	ou did not already	list			
	o es. Give specific	3					
	formation		····			\$	0.00
						\$	0.00
						\$	0.00
						\$	0.00
						\$	0.00
		***************************************				\$	0.00
45. Add ti	he dollar value	of all of you	r entries from Part	5, including any	entries for pages you have attached	\$	0.00
10110	re o. writes that	number ner			······································		
Part 6:	Describe /	lny Farm- a	nd Commercial	Fishing-Related	l Property You Own or Have an Interest	in.	
	ir you own o	or have an int	erest in farmland,	list it in Part 1.			
46. Do yo i	u own or have	any legal or e	equitable interest	in any farm- or co	mmercial fishing-related property?		
☑ No	. Go to Part 7.			·			
∟ Ye	s. Go to line 47						
						Current value of the portion you own?	9
						Do not deduct secured	claims
47. Farm :	····					or exemptions.	
Examp M No	oles: Livestock,	poultry, farm-r	aised fish				
	\$		*************				
							0.05
						\$	0.00

Griffin Tavares D. Debtor 1 First Name 48. Crops-either growing or harvested Z No Yes. Give specific information..... 0.00 49. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade Z No **Q** Yes..... 0.00 50. Farm and fishing supplies, chemicals, and feed No No ☐ Yes..... 0.00 51. Any farm- and commercial fishing-related property you did not already list Z No Yes. Give specific information..... 0.00 52. Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached 0.00 for Part 6. Write that number here Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership **1** No 0.00 Yes. Give specific information..... 0.00 0.00 54. Add the dollar value of all of your entries from Part 7. Write that number here 0.00 Part 8: List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2 0.00 0.00 56. Part 2: Total vehicles, line 5 800.00 57. Part 3: Total personal and household items, line 15 0.00 58 Part 4: Total financial assets, line 36 0.00 59. Part 5: Total business-related property, line 45 0.00 60 Part 6: Total farm- and fishing-related property, line 52 0.00 61. Part 7: Total other property not listed, line 54 800.00 Copy personal property total 🏓 🛧 💲 62. Total personal property. Add lines 56 through 61. 800.00 63. Total of all property on Schedule A/B. Add line 55 + line 62..... 800.00

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Fill in this in	nformation to identify yo	our case:						
Debtor 1	Tavares	D.	Griffin					
Debtor 2	First Name	Middle Name	Last Name					
(Spouse, if filing)		Middle Name	Last Name					
	Bankruptcy Court for the: No	rthern District of Illino	sis					
Case number (if known)		***************************************						Check if this is a amended filing
	_							J
	orm 106C							
Sched	ule C: The	Propert	y You	Claim	as	Exemp	t	12/15
Using the property space is neede your name and	e and accurate as possible erty you listed on Schedu d, fill out and attach to the case number (if known). of property you claim a	le A/B: Property (Offi is page as many copi	cial Form 106 ies of <i>Part 2: A</i>	A/B) as your sou A <i>dditional Page a</i>	irce, lis as nece	t the property tha essary. On the top	it you claim as o of any additio	exempt. If more onal pages, write
specific dollar of any applica retirement fun imits the exer	amount as exempt. Alt ble statutory limit. Som ids—may be unlimited in aption to a particular do ed to the applicable sta	ernatively, you may e exemptions—sucl n dollar amount. Ho bilar amount and the	claim the ful h as those fo wever, if you	l fair market val r health aids, rig claim an exem	lue of t ghts to ption c	the property being receive certain of 100% of fair m	ng exempted benefits, and arket value u	up to the amount tax-exempt nder a law that
	lentify the Property \	-	mpt					
☐ You ar	e of exemptions are you re claiming state and fede re claiming federal exemp roperty you list on Sche	eral nonbankruptcy ex etions. 11 U.S.C. § 52	cemptions. 11 22(b)(2)	U.S.C. § 522(b)	(3)	·		
Brief des Schedule	cription of the property a A/B that lists this proper		value of the you own	Amount of the	exem	otion you claim	Specific lav	vs that allow exemption
		Copy the Schedule	value from A/B	Check only one	e box fo	r each exemption.		
Brief description	n: Household	<u>\$ 600.0</u>	00	Ø \$ 600.00)		735 ilcs 5	/12-1001(b)
Line from Schedule	A/B: 6					ket value, up to atutory limit		**************************************
Brief description	Electronics	<u>\$200.0</u>	00	2 \$ 200.00			735 ilcs 5	/12-1001(b)
Line from Schedule	A/B: 7					et value, up to atutory limit		
Brief description	Automobile	<u>\$12,50</u>	00.00	Q s			735 ilcs 5	/12-1001(c)
Line from Schedule /	A/B: <u>3.1</u>			100% of fa any applica				
	aiming a homestead exc							
(Subject to	adjustment on 4/01/16 ar	nd every 3 years after	r that for case	s filed on or after	r the da	ite of adjustment.)	
Yes. Di	d you acquire the propert	y covered by the exe	mption within	1,215 days befor	re you	filed this case?		
☐ No ☐ Ye								

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Debtor 1

Tavares		D.	
First Name	Middle Name		Last Name

Griffin

Case number (if known)

Additional Page

Brief descript on Schedule	ion of the property and line VB that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Check only one box for each exemption	
Brief description:	Checking Account	\$0.00	₫ s0.00	735 ilcs 5/12-1001(b)
Line from Schedule A/B:	<u>17</u>		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	Q \$	
Line from Schedule A/B:	Applicate de Constitución de C		100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	Q \$	
Line from Schedule A/B:			☐ 100% of fair market value, up to any applicable statutory limit	-
Brief description:		\$	<u></u> s	
Line from Schedule A/B:			☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	\$ \$ 100% of fair market value, up to	
Line from Schedule A/B:			any applicable statutory limit	
Brief description:	***************************************	\$	Q \$	
Line from Schedule A/B:	Water the same of		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:	MANAGE	\$	\$	
Line from Schedule A/B:			100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	\$	
Line from Schedule A/B:	== 1 Street-Valle		any applicable statutory limit	
Brief description:	***************************************	\$	Q \$	
Line from Schedule A/B:	- Man Participant State		100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	Q \$	
Line from Schedule A/B:	-		100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	\$\$ 100% of fair market value, up to	
Line from Schedule A/B:			any applicable statutory limit	
Brief description:		\$	Q \$	
Line from Schedule A/B:	NA		100% of fair market value, up to any applicable statutory limit	

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Debtor 1 Tavare	s D	. Griffin				
First Name	Middle	Name Last Name				
Debtor 2 (Spouse, if filing) First Name	Middk	Name Last Name				
United Ctatas Banksunta						
United States Bankruptcy	Coun for the: Norther	1 District of Hilnois				
Case number(If known)	***************************************			По	heck if this	
					neck if this nended filir	
				ui	nongoa ma	יט
Official Form	106D					
Schedule I	D: Credito:	s Who Have Claims Secur	ed by Proi	oertv	12	2/15
and the state of t		. If two married people are filing together, both are e				
internation, it more t	space is needed, col	Ⅳ the Additional Page, fill it out, number the entries	qually responsible t and attach it to this	for supplying c s form. On the t	orrect op of any	
additional pages, wri	te your name and ca	se number (if known).				
. Do any creditors h	ave claims secured	hy vour property?				
		m to the court with your other schedules. You have noth	San and a second second			
Yes Fill in all of	the information below	m to the court with your other schedules. You have noth	ing else to report on	this form.		
was 100. I iii iii ali ui	the inomitation below	`				
ant in List All Se	cured Claims					
List all secured cla	ms. If a creditor has	nore than one secured claim, list the creditor separately	Column A	Column B	Colui	
for each claim. If me	ore than one creditor I	nas a particular claim, list the other creditors in Part 2	Amount of claim Do not deduct the	Value of colla that supports		
As much as possible	, list the claims in alp	habetical order according to the creditor's name.	value of collateral.	claim	if any	
1 Ally Einancial		Describe the property that	s 16,742.00	16740	-	0.
Ally Financial Creditor's Name		Describe the property that secures the claim:	\$10,742.00	_{\$} 16,742	2.00 \$	U.
P.O. Box 38090)1	2013 Dodge Charger				
Number Street		-				
		As of the date you file, the claim is: Check all that apply				
		Contingent				
Bloomington	mn 55438	Unliquidated				
City	State ZIP Code	☐ Disputed				
Who owes the debt?	heck one.	Nature of lien. Check all that apply.				
Debtor 1 only		An agreement you made (such as mortgage or secured				
Debtor 2 only		car loan)				
Debtor 1 and Debtor	2 only	Statutory lien (such as tax lien, mechanic's lien)				
At least one of the de	btors and another	Judgment lien from a lawsuit				
☐ Check if this claim	relates to a	Other (including a right to offset)	-			
community debt						
Date debt was incurre	d 02/13/2016	Last 4 digits of account number 1 6 9 6				
2]		Describe the property that secures the claim:	\$	\$	\$	
Creditor's Name	A-41				······································	***************************************
Number Street		As of the date you file, the claim is: Check all that apply.				
Number Street		☐ Contingent				
Number Street						
Number Street City	State ZIP Code	☐ Unliquidated				
City		☐ Unliquidated ☐ Disputed				
City Who owes the debt? C		Unliquidated Disputed Nature of lien. Check all that apply.				
City Who owes the debt? C Debtor 1 only		Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured)				
City Who owes the debt? C Debtor 1 only Debtor 2 only	heck one.	Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured car loan)				
City Who owes the debt? Co Debtor 1 only Debtor 2 only Debtor 1 and Debtor	heck one. 2 only	Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien)				
City Who owes the debt? Co Debtor 1 only Debtor 2 only Debtor 1 and Debtor At least one of the de	heck one. 2 only btors and another	Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit				
City Who owes the debt? C Debtor 1 only Debtor 2 only Debtor 1 and Debtor	heck one. 2 only btors and another	Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit				

Case 17-29738 Doc 1 Filed 10/04/17 Entered 10/04/17 10:59:36 Desc Main Page 23 of 52 Document Fill in this information to identify your case: **Tavares** Griffin Debtor 1 First Name Middle Name Last Name Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: Northern District of Illinois Check if this is an amended filing Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims 12/15 Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known). EATHER List All of Your PRIORITY Unsecured Claims 1. Do any creditors have priority unsecured claims against you? No. Go to Part 2. Yes. 2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) Total claim Priority Nonpriority amount amount 2.1 0.00 \$ 0.00 \$ Last 4 digits of account number Priority Creditor's Name When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Who incurred the debt? Check one. Disputed Debtor 1 only Debtor 2 only Type of PRIORITY unsecured claim: Debtor 1 and Debtor 2 only Domestic support obligations At least one of the debtors and another Taxes and certain other debts you owe the government Check if this claim is for a community debt Claims for death or personal injury while you were intoxicated is the claim subject to offset? ☐ No Other, Specify ☐ Yes 2.2 0.00 \$ 0.00 \$ 0.00 Last 4 digits of account number Priority Creditor's Name When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Who incurred the debt? Check one Debtor 1 only Type of PRIORITY unsecured claim: Debtor 2 only Domestic support obligations Debtor 1 and Debtor 2 only Taxes and certain other debts you owe the government

☐ No ☐ Yes

At least one of the debtors and another

is the claim subject to offset?

Check if this claim is for a community debt

intoxicated

Other, Specify_

Claims for death or personal injury while you were

Doc 1 Filed 10/04/17 Entered 10/04/17 10:59:36 Desc Main Page 24 of 52 Document Debtor 1 Part 2 **List All of Your NONPRIORITY Unsecured Claims** 3. Do any creditors have nonpriority unsecured claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules. 4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2. Total claim MEDICAL BUSINESS BUREAU Last 4 digits of account number 1 6 9 6 Nonpriority Creditor's Name 08/13/2015 When was the debt incurred? 1460 RENAISSANCE DRIVE SUITE 400 Number Street PARK RIDGE 60068 As of the date you file, the claim is: Check all that apply. State ZIP Code Contingent Who incurred the debt? Check one. Unliquidated Debtor 1 only Disputed Debtor 2 only Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another Student loans Obligations arising out of a separation agreement or divorce Check if this claim is for a community debt that you did not report as priority claims is the claim subject to offset? Debts to pension or profit-sharing plans, and other similar debts ☐ No Other, Specify Collections Account Q Yes FIRST FINANCIAL INVESTMENT Last 4 digits of account number

1,198.00 150.00 09/30/2013 Nonpriority Creditor's Name When was the debt incurred? 3091 GOVERNORS LAKE DR SUITE 500 Number As of the date you file, the claim is: Check all that apply. **NORCROSS** 30071 GA State ZIP Code Contingent Unliquidated Who incurred the debt? Check one. ☐ Disputed Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only At least one of the debtors and another Student loans Obligations arising out of a separation agreement or divorce Check if this claim is for a community debt that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offset? Other, Specify Collections Account Z No ☐ Yes MERCHANTS CREDIT GUIDE Last 4 digits of account number __1 _6 _9 _6 300.00 Nonpriority Creditor's Name 04/11/2016 When was the debt incurred? 223 W JACKSON ST SUITE 900 Number Street **CHICAGO** 60606 11_ As of the date you file, the claim is: Check all that apply. State ZIP Code Contingent Who incurred the debt? Check one Unliquidated Debtor 1 only Disputed Debtor 2 only Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans Check if this claim is for a community debt Obligations arising out of a separation agreement or divorce that you did not report as priority claims Is the claim subject to offset? Debts to pension or profit-sharing plans, and other similar debts ₩ No Other. Specify Collections Account Yes

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Debtor 1

Part 2:

Your NONPRIORITY Unsecured Claims — Continuation Page

Aft	er listing any entries on this page, n	umber the	em beginning with	h 4.4, followed by 4.5, and so forth.	Total claim
4.4	ILLNOIS TOLLWAY			Last 4 digits of account number 1 6 9 6	\$_6,000.00
	Nonpriority Creditor's Name 2700 OGDEN AVENUE			When was the debt incurred? 02/02/2014	
	Number Street DOWNERS GROVE	IL	60515	As of the date you file, the claim is: Check all that apply.	
	City	State	ZIP Code	☐ Contingent	
	Who incurred the debt? Check one.			Unliquidated	
	Debtor 1 only			☐ Disputed	
	Debtor 2 only			Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only At least one of the debtors and another			☐ Student loans	
				Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	Check if this claim is for a comm	unity debt		Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?			Other, Specify Collections Account	
p-Al-mbournes,	Yes				
4.5				1 6 0 6	200.00
	First Financial Investment Fu Nonpriority Creditor's Name	nd Holdii	ngs	Last 4 digits of account number 1 6 9 6	s <u>300.00</u>
	230 Peachtree St NW Number Street			When was the debt incurred? 09/30/2013	
	ATLANTA	GA	30303	As of the date you file, the claim is: Check all that apply.	
	City	State	ZIP Code	Contingent	
	Who incurred the debt? Check one.			☐ Unliquidated ☐ Disputed	
	Debtor 1 only				
	Debtor 2 only Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	r		Student loansObligations arising out of a separation agreement or divorce that	
	Check if this claim is for a commu	unity debt		you did not report as priority claims	
	is the claim subject to offset?	,		Debts to pension or profit-sharing plans, and other similar debts Other. Specify Collections Account	
	☑ No			Cilies, Specify Oblicostorio Account	
	☐ Yes				
4.6	and the second of the second o		* * * * * * * * * * * * * * * * * * * *		¢ 213.00
L.:X.)	STANISLAUS CREDIT CONT Nonpriority Creditor's Name	TROL SI	ERVICES	Last 4 digits of account number 1 6 9 6	\$
	914 14th Street Number Street			When was the debt incurred? 04/23/2015	
	ModestO	CA	95354	As of the date you file, the claim is: Check all that apply.	
	City	State	ZIP Code	Contingent	
	Who incurred the debt? Check one.			☐ Unliquidated ☐ Disputed	
	Debtor 1 only			Soporous	
	Debtor 2 only			Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only At least one of the debtors and another	f		Student loans	
	☐ Check if this claim is for a commu			Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	Is the claim subject to offset?	mily debt		Debts to pension or profit-sharing plans, and other similar debts	
	M No			☐ Other, Specify Collections Account	
	Yes				

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Debtor 1

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Your NONPRIORITY Unsecured Claims - Continuation Page

Aft	er listing any entries on this page, r	number the	m beginning with	h 4.4, followed by 4.5, and so forth.	Total claim
4.7	ACCEPTANCE NOW			Last 4 digits of account number 1 6 9 6	\$_2,837.00
	Nonpriority Creditor's Name 5501 Headquarters Dr.			When was the debt incurred? 05/08/2017	
	Number Street Plano	TX	75024	As of the date you file, the claim is: Check all that apply.	
	City Who incurred the debt? Check one.	State	ZIP Code	Contingent Unliquidated Disputed	
	Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	ər		Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a comm Is the claim subject to offset? ✓ No ☐ Yes			 Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Collections Account 	
4.8	0			Last 4 digits of account number 1 6 9 6	s 0.00
	Chex Systems Nonpriority Creditor's Name			others	\$0.00
	7805 Hudson Road			When was the debt incurred? 01/01/2010	
	Number Street Woodberry	MN	55125	As of the date you file, the claim is: Check all that apply.	
	Who incurred the debt? Check one. Debtor 1 only Debtor 2 only	State	ZIP Code	Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim:	
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and anothe ☐ Check if this claim is for a commit	•		 Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
	Is the claim subject to offset? No Yes	unity debt		Debts to pension or profit-sharing plans, and other similar debts Other. Specify Collections Account	
4.9					
4.5	Certegy Nonpriority Creditor's Name		restranting and an analysis of the second se	Last 4 digits of account number 1 6 9 6	\$0.00
	11601 Roosevelt Blvd, N			When was the debt incurred? 01/01/2010	
	Number Street			As of the date you file, the claim is: Check all that apply.	
	City Who incurred the debt? Check one.	State	ZIP Code	Contingent Unliquidated Disputed	
	Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	r		Type of NONPRIORITY unsecured claim: Student loans	
	☐ Check if this claim is for a commuls the claim subject to offset? ☑ No ☐ Yes			Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Collections Account	

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Debtor 1

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1 :	- 1	- 889	4.6
9.0	DOM:		翻鎖
		50.738	

Your NONPRIORITY Unsecured Claims - Continuation Page

Afte	r listing any entries on this page, nu	ımber thei	n beginning with	4.4, followed by 4.5, and so forth.	Tota	l claim
5.0	Equifax Bankruptcy Departme	nt		Last 4 digits of account number 1 6 9 6	\$	0.00
	Nonpriority Creditor's Name P.O. Box 740241			When was the debt incurred? $01/01/2010$		
	Number Street Atlanta	GA	30374	As of the date you file, the claim is: Check all that apply.		
	Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a commuls the claim subject to offset? No Yes		ZIP Code	 Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Collections Account 		
5.1	Experian Bankruptcy Deparme	ent		Last 4 digits of account number 1 6 9 6	\$	0.00
	P.O. Box 2002			When was the debt incurred? $\frac{01/01/2010}{}$		
	Number Street Allen	TX	75013	As of the date you file, the claim is: Check all that apply.		
	Who incurred the debt? Check one.	State	ZIP Code	☐ Contingent ☐ Unliquidated ☐ Disputed		
	✓ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a commulis the claim subject to offset? ✓ No □ Yes			Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Collections Account		
5.2	· · · · · · · · · · · · · · · · · · ·				\$	0.00
	TransUnion Bankruptcy Depar	tment	***************************************	Last 4 digits of account number 1 6 9 6	Y	
	P.O. Box 1000			When was the debt incurred? 01/01/2010		
	Number Street Chester	PA	19022	As of the date you file, the claim is: Check all that apply.		
	City Who incurred the debt? Check one.	State	ZIP Code	☐ Contingent ☐ Unliquidated ☐ Disputed		
	Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another			Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that		
	☐ Check if this claim is for a community the claim subject to offset? ☑ No ☐ Yes	nity debt		you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Collections Account		

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Debtor 1

Part 2:

Your NONPRIORITY Unsecured Claims - Continuation Page

or noung any enuies on this	page, number men beginning wil	th 4.4, followed by 4.5, and so forth.	Total claim
Bob's Discount Furnitu	ire	Last 4 digits of account number 1 6 9 6	\$ 1,500.00
Nonpriority Creditor's Name 102 W Roosevelt Road	d	When was the debt incurred? 01/02/2016	
Number Street Villa Park	IL 60181	As of the date you file, the claim is: Check all that apply.	
City	State ZIP Code	Contingent	
Who incurred the debt? Che	afr and	☐ Unliquidated	
	ck one.	☐ Disputed	
Debtor 1 only Debtor 2 only			
Debtor 1 and Debtor 2 only		Type of NONPRIORITY unsecured claim:	
At least one of the debtors a	nd another	Student loans	
		Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
Check if this claim is for	a community debt	Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offset	?	Other. Specify Collections Account	
☑ No		The state of the s	
Yes			
•			
		•	
		Last 4 digits of account number	\$
Nonpriority Creditor's Name		When was the debt incurred?	
Number Street			
Addition Street		As of the date you file, the claim is: Check all that apply.	
City	State ZIP Code	Contingent	
Who incurred the debt? Chec	de ann	Unliquidated	
	x one,	☐ Disputed	
Debtor 1 only Debtor 2 only		The state of high state of the	
Debtor 2 only Debtor 1 and Debtor 2 only		Type of NONPRIORITY unsecured claim:	
At least one of the debtors ar	ad another	☐ Student loans	
		Obligations arising out of a separation agreement or divorce that	
☐ Check if this claim is for a	a community debt	you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
is the claim subject to offset	?	Other. Specify	
□ No		outer, opening	
☐ Yes			
	and the second second		
		Last 4 digits of account number	\$
Nonpriority Creditor's Name		Last 4 digits of account number	
Transporting Grants a realist		When was the debt incurred?	
Number Street		As of the date you file, the claim is: Check all that apply.	
City	State ZIP Code	Contingent	
		☐ Unliquidated	
Who incurred the debt? Chec	k one.	Disputed	
Debtor 1 only			
Debtor 2 only		Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only		☐ Student loans	
At least one of the debtors an	d another	Obligations arising out of a separation agreement or divorce that	
Check if this claim is for a	community debt	you did not report as priority claims	
Is the claim subject to offset	•	Debts to pension or profit-sharing plans, and other similar debts	
No		Other. Specify	
L.I. No □ V			

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Debtor 1

Part 3:

List Others to Be Notified About a Debt That You Already Listed

Elmhurst Emergency Med	dical Serv	/ices	On which entry in Part 1 or Part 2 did you list the original creditor?
_{Vame} 200 Berteau Ave			Line 4.1 of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street		***************************************	Part 2: Creditors with Nonpriority Unsecured Cla
Elmhurst	IL State	60126 ZIP Code	Last 4 digits of account number 1 6 9 6
ELMHURST MEMORIAL	HOSPIT	AL	On which entry in Part 1 or Part 2 did you list the original creditor?
55 E Brush Hill Rd			Line 4.3 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims
Elmhurst	IL State	60126 ZIP Code	Last 4 digits of account number 1 6 9 6
Westlake Hospital		·	On which entry in Part 1 or Part 2 did you list the original creditor?
1225 W Lake Street	· · · · · ·		Line 4.5 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Melrose Park, IL 60160	IL State	60160 ZIP Code	Last 4 digits of account number 1 6 9 6
CEP America California ir	n Modest	0	On which entry in Part 1 or Part 2 did you list the original creditor?
2100 Powell St #920	····		Line 4.6 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Emeryville	CA State	94608 ZIP Code	Last 4 digits of account number 1 6 9 6
			On which entry in Part 1 or Part 2 did you list the original creditor?
lame lumber Street			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
ity	State	ZIP Code	Last 4 digits of account number
ame	····	Think to the to the transfer of the transfer o	On which entry in Part 1 or Part 2 did you list the original creditor?
lumber Street			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
ity	State	ZIP Code	Last 4 digits of account number
ame			On which entry in Part 1 or Part 2 did you list the original creditor?
			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims

City

ZIP Code

State

Last 4 digits of account number ___ __

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Debtor 1

Tavares

Parit 4:

Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

			Total claim	
Total claims	6a. Domestic support obligations	6a.	\$	0.00
from Part 1	6b. Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c. Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d.	+\$	0.00
	6e. Total. Add lines 6a through 6d.	6e.	\$	0.00
			Total claim	
Total claims	6f. Student loans	6f.	\$	0.00
from Part 2	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	 Other. Add all other nonpriority unsecured claims. Write that amount here. 	6í.	+ \$	12,498.00
	6j. Total. Add lines 6f through 6i.	6j.	\$	12,498.00

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Debtor	Tavares	D.	Griffin
	First Name	Middle Name	Last Name
Debtor 2			
(Spouse If filing)	First Name	Middle Name	Last Name
	First Name	Middle Name	Last Name
-			
.,	Bankruptcy Court for	the: Northern District of II	linois
.,	Bankruptcy Court for	the: Northern District of II	linois

Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - 4 Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease

State what the contract or lease is for

Rose Ca	ampbell			Residential Apartment Lease
Name				
219 Zue	lke Drive			
Number	Street			
	d			
City		State	ZIP Code	
Name				
Number	Street			
			310.0	
City		State	ZIP Code	
Name				***************************************
Number	Street		· · · · · · · · · · · · · · · · · · ·	
City		State	ZIP Code	
Nama		d		
ivanie				
Number	Street			***************************************
(4011100)	00000			
Citv		State	ZIP Code	
Name				
			····	
Number	Street			
City		State	7IP Code	namenta and a second a second and a second a
	Name 219 Zue Number Bellwood City Name Number City Name Number City Name City Number Street Bellwood City Name Number Street Name 219 Zuelke Drive Number Street Bellwood IL City State Name Number Street City State Name Number Street City State Name Number Street City State	Name 219 Zuelke Drive Number Street Bellwood IL 60104 City State ZIP Code Name Number Street City State ZIP Code Name Number Street City State ZIP Code Name Number Street City State ZIP Code		

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Fills	in this ii	iformation to ider	ntify your case:			
Debt	tor 1	Tavares	D.	Griffin		
Debt	or 2	First Name	Middle Name	Last Name		
) First Name	Middle Name	Last Name		
Unite	ed States	Bankruptcy Court for	the: Northern District of III	ínois		
	number	***************************************	**************************************			
(lf kn	(OWII)		**************************************			☐ Check if this is an
		····				amended filing
-		Form 106H				
	*************		ur Codebtor			12/15
are fill and n case i	ing toge umber to number to you h No Yes Vithin tharizona, Yes. I No. G	other, both are eq he entries in the l (if known). Answ ave any codebtor he last 8 years, ha California, Idaho, L So to line 3. Did your spouse, fo o es. In which comm	ually responsible for suboxes on the left. Attacher every question. s? (If you are filing a joint ve you lived in a communication, Nevada, New Normer spouse, or legal equestions.)	pplying correct information. In the Additional Page to this process, do not list either spouse unity property state or territor fexico, Puerto Rico, Texas, Washington at the time uivalent live with you at the time	f more spaceage. On the as a codebto sy? (Commur shington, and	nity property states and territories include
	7	ity	State	ZIP Code	···	
s S	hown in Chedule	line 2 again as a e D (Official Form	codebtor only if that pe	rson is a guarantor or cosign	er. Make su	ouse is filing with you. List the person re you have listed the creditor on ial Form 106G). Use Schedule D,
	Column	1: Your codebtor			Colt	umn 2: The creditor to whom you owe the debt
					Che	eck all schedules that apply:
3.1		Campbell			V	Schedule D, line 2.1
	Name 219 Z	Zuelke Drive				Schedule E/F, line
	Number	Street				Schedule G, line
	Bellw	ood	L State	60104 ZIP Code	····	
3.2	,		3,010	217 0000		
	Name					Schedule D, line
					Q	Schedule E/F, line
	Number	Street				Schedule G, line
3.3	City		State	ZIP Code		
0.0	Name	***			D	Schedule D, line
	. 161/16					Schedule E/F, line
	Number	Street	WP-1404-140-140-140-140-1-1-1-1-1-1-1-1-1-			Schedule G, line
	City	***	State	7IP Code	***************************************	

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Fill in this in	nformation to identify	your case:						
5.44.4	Tavares	D.	Griffin					
Debtor 1	First Name	Middle Name	Last Name		-			
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	·····				
United States	Bankruptcy Court for the:	Northern District of Illinois						
Case number						Check if t	his is:	
(If known)		· · · · · · · · · · · · · · · · · · ·				🔲 An am	ended filing	
							plement showing postpetition chapter 1 e as of the following date:	3
Official Fo	orm 106I					MM / [DD / YYYY	
Sched	luie I: You	ır İncome					12/15	
supplying co- if you are sep separate shee	rrect information. If your earated and your spou	ou are married and not fill se is not filing with you, top of any additional pag	ing jointly, and yo do not include inf	ur sp orma	ouse is	living with your spo	or 2), both are equally responsible for you, include information about your spou use. If more space is needed, attach a known). Answer every question.	se.
Fill in you information	r employment on.		Debtor 1				Debtor 2 or non-filing spouse	
attach a se	e more than one job, eparate page with n about additional	Employment status		ed			☐ Employed ☐ Not employed	
Include pa self-emplo	rt-time, seasonal, or yed work.	Occupation	Exterminator					
	n may include student aker, if it applies.	Occupation	LAGITIMATO					_
		Employer's name	Construction	Rex				
		Employer's address	640 N. LaSal Number Street	le Di	ive		Number Street	
			Chicago City	Stat	IL e ZIP	60654 Code	City State ZIP Code	
		How long employed the	·				6 Yrs	
Part 2:	Give Details About	Monthly Income						
	nonthly income as of ess you are separated	the date you file this form	n. If you have nothi	ing to	report fo	or any line, w	rite \$0 in the space. Include your non-filing	
If you or yo	our non-filing spouse ha	ive more than one employe tach a separate sheet to th		rmati	on for al	l employers f	or that person on the lines	
					Foi	Debtor 1	For Debtor 2 or non-filing spouse	
		ary, and commissions (be calculate what the monthly		2.	\$_3	3,044.00	\$	
3. Estimate	and list monthly over	time pay.		3.	+\$	0.00	+ \$	
4. Calculate	gross income. Add lin	ne 2 + line 3.		4.	\$_3	3,044.00	\$	

Official Form 1061 Schedule I: Your Income page 1

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Debtor		D. Middle Name Last Name	Griffin		Cas	e number (# ki	nown)	******************************			
					For I	Debtor 1		or Debtor 2 on-filing spo			
Co	py line 4 here	••••••	·····	. 🏓 4.	\$	3,044.00		\$			
5. Lis	t all payroll deductio	ons:									
5	a. Tax, Medicare, and	d Social Security deducti	ons	5a.	\$	673.00		\$			
5t	. Mandatory contrib	outions for retirement pla	ns	5b.	\$	0.00		\$			
50	c. Voluntary contribe	utions for retirement plan	s	5c.	\$	110.00		\$			
50	d. Required repayme	ents of retirement fund lo	ans	5d.	\$	0.00		\$			
56	e. Insurance			5e.	\$	102.00		\$			
5f	. Domestic support	obligations		5f.	\$	0.00		\$			
59	g. Union dues			5g.	\$	0.00		\$	·····		
51	n. Other deductions.	Specify: 401K loan		5h.	+\$	85.00	+	\$			
6. A	dd the payroll deduc	tions. Add lines 5a + 5b +	5c + 5d + 5e +5f + 5g + 5	h. 6.	\$	970.00		\$			
7. C :	alculate total monthi	y take-home pay. Subtrac	t line 6 from line 4.	7.	\$	2,074.00		\$	***************************************		
8. Lis	st all other income re	egularly received:									
88	profession, or farr										
		for each property and busing nd necessary business exp		8a.	\$	0.00		\$			
81	o. Interest and divide			8b.	\$	0.00		\$			
80	. Family support pa regularly receive	yments that you, a non-fi	ling spouse, or a depend	dent	***************************************			* *************************************			
	- •	ousal support, child suppor perty settlement.	t, maintenance, divorce	8c.	\$	0.00		\$			
80	i. Unemployment co	mpensation		8d.	\$	0.00		\$			
86	e. Social Security			8e.	\$	0.00		\$			
8f	Include cash assista that you receive, su	assistance that you regu ance and the value (if know ch as food stamps (benefit Program) or housing subs	n) of any non-cash assista s under the Supplemental		\$	0.00		\$	***************************************		
80	g. Pension or retirem	ent income		8g.	¢	0.00		¢			
-	n. Other monthly inc	,			Ψ		.1.		***************************************		
	•	Add lines 8a + 8b + 8c + 8c	I + 8e + 8f +8g + 8h.	_ 8h. 9.	+ \$ \$	0.00	T	*\$ \$			
		me. Add line 7 + line 9. For Debtor 1 and Debtor 2	or non-filing spouse.	10.	\$	2,074.00	+	\$		= [\$_	2,074.00
Inc	***	contributions to the expension an unmarried partner, me	•			nts, your roo	mmate	es, and other			
	not include any amοι _{ecify:} <u>n/a</u>	ints already included in line	s 2-10 or amounts that an			o pay exper	nses lis	sted in <i>Sche</i> d	lule J. 11. *	! \$_	0.00
		last column of line 10 to to Summary of Your Assets					•		12.	8	2,074.00
* *(no mai amount on the	Cummary or Your Moodle	and Eldemilles and Cendin	ulatibili	vai iiiiUll	nauvn, u it i	սիհաբ	,	14.		mbined
Z	No. Yes. Explain:	ease or decrease within t	ne year after you file this	form?						mo	nthly income

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Fills	in this i	nformation to identi	fy your case:					
Debt	or 1	Tavares	D.	Griffin				
Debt	or 2	First Name	Middle Name	Last Name		eck if this is:		
) First Name	Middle Name	Last Name	ŧ	An amended	-	petition chapter 13
Unite	d States	Bankruptcy Court for the	e: Northern District of III	linois			of the following	
Case (If kn	number	. 				MM / DD / YYY	Y	
Offi	cial	Form 106J						
			– our Expen	ses				12/15
inform	nation.		ded, attach another s		ng together, both are e a. On the top of any add			
Part	1:	Describe Your He	ousehold					
1. Is tl	his a jo	int case?			,			
		o to line 2. Des Debtor 2 live in a	a separate household	?				
		No	-					
		Yes. Debtor 2 must	file Official Form 106J-	2, Expenses for S	Separate Household of Do	ebtor 2.		
Do	- not list l	ve dependents? Debtor 1 and	☐ No ☑ Yes. Fill out this	s information for	Dependent's relationship Debtor 1 or Debtor 2	p to	Dependent's age	Does dependent live with you?
	otor 2.	- 41 4	each depender	ıt	Cid	time of public confirmation of the section of the s		D No
nan		e the dependents'			Girl		2	☑ Yes
						00745 ************************************		☐ No ☐ Yes
								□ No
						***************************************	base and the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state	☐ Yes
							-	☐ No ☐ Yes
								O No
							Be-fa-bannatte-the-th-th-th-	Yes
exp	enses	penses include of people other than nd your dependents	No Pes					
Part 2	a E	stimate Your Ong	oing Monthly Expe	nses				
expen	-	of a date after the ba		•	re using this form as a ental <i>Schedule J</i> , check	• •	•	•
	•	•	on-cash government a ed it on Sc <i>hedule I:</i> Yo	•			Your expe	nses
4. Th	e renta	or home ownership		•	first mortgage payments	and	· Macetana ana anga mpa mana ana ana ana ana ana ana ana ana a	870.00
	-	or the ground or lot. uded in line 4:				4.	*	
4a		estate taxes				4a.	\$	0.00
4b		erty, homeowner's, or	renter's insurance			4b.	\$	0.00
4c.	. Hom	e maintenance, repair	r, and upkeep expenses	3		4c .	\$	0.00
4d	. Hom	eowner's association	or condominium dues			4d.	\$	0.00

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Debtor 1 Tavares D. Griffin Case number (if known).

			Your ex	cpenses
5.	Additional mortgage payments for your residence, such as home equity loans	5.	\$	0.00
6.	Utilities:			
	6a. Electricity, heat, natural gas	6a.	\$	60.00
	6b. Water, sewer, garbage collection	6b.	\$	25.00
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	200.00
	6d. Other, Specify: n/a	6d.	\$	0.00
7.	Food and housekeeping supplies	7.	\$	275.00
8.	Childcare and children's education costs	8.	\$	375.00
9.	Clothing, laundry, and dry cleaning	9.	\$	40.00
10.	Personal care products and services	10.	\$	100.00
11.	Medical and dental expenses	11.	\$	0.00
12.	Transportation. Include gas, maintenance, bus or train fare.		e.	325.00
	Do not include car payments.	12.	Ф	
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	0.00
14.	Charitable contributions and religious donations	14.	\$	0.00
15.	Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.			
	15a. Life insurance	15a.	\$	0.00
	15b. Health insurance	15b.	\$	0.00
	15c. Vehicle insurance	15c.	\$	275.00
	15d. Other insurance. Specify: n/a	15d.	\$	0.00
16.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: n/a	16.	\$	0.00
17.	Installment or lease payments:			
	17a. Car payments for Vehicle 1	17a.	\$	560.00
	17b. Car payments for Vehicle 2	17b.	\$	0.00
	17c. Other. Specify: n/a	17c.	\$	0.00
	17d. Other. Specify: n/a	17d.	\$	0.00
18.	Your payments of alimony, maintenance, and support that you did not report as deducted from			
10.	your pay on line 5, Schedule I, Your Income (Official Form 106).	18.	\$	0.00
19.	Other payments you make to support others who do not live with you.			
	Specify: n/a	19.	\$	0.00
20.	Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Incom		-	
20.	20a. Mortgages on other property	20a.	\$	0.00
	20b. Real estate taxes		\$	
	20c. Property, homeowner's, or renter's insurance	20b. 20c.		0.00
	20d. Maintenance, repair, and upkeep expenses			0.00
		20d.		
	20e. Homeowner's association or condominium dues	20e.	\$	

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Debtor		D.	Griffin	Case number (#known)		~	
21. Ot	her. Specify: n/a	NOTICE LOOK INTRICE			21.	+\$	0.00
22. Ca	iculate your monthly ex	penses.					
22	a. Add lines 4 through 21			2	22a.	\$	3,105.00
22	b. Copy line 22 (monthly	expenses for Debtor 2),	if any, from Official Form 10	6J-2 2	22b.	\$	0.00
22	c. Add line 22a and 22b.	The result is your month	ly expenses.	2	2c.	\$	3,105.00
23. Cal	culate your monthly net	income.					2.074.00
23a.	Copy line 12 (your con	nbined monthly income)	from Schedule I.	:	23a.	\$	2,074.00
23b.	Copy your monthly exp	enses from line 22c ab	ove.	2	23b.	- \$	3,105.00
23 c.	Subtract your monthly The result is your mon	expenses from your mo thly net income.	nthly income.	2	23c.	\$	-1,031.00
24. Do	you expect an increase	or decrease in your ex	xpenses within the year aft	er you file this form?			
For	example, do you expect	to finish paying for your	car loan within the year or do	o you expect your			

mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

M No.

Q Yes. Explain here: Case 17-29738 Doc 1 Filed 10/04/17 Entered 10/04/17 10:59:36 Desc Main Document Page 38 of 52

Fill in this in	formation to id	entify your case:			
Debtor 1	Tavares	D.	Griffin		
Debtor 2	First Name	Middle Name	Last Name		
(Spouse, if filing		Middle Name for the: Northern District of IIII	Last Name		
Case number		or the Morthall District of the	nois		
(If known)				- The state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the	Check if this is an amended filing
Officia	l Form 10	6Dec			
Deci	aratior	About an I	ndividual D	ebtor's Schedules	12/15
if two mar	ried people are	filing together, both are eq	ually responsible for sup	plying correct information.	
obtaining years, or b	Sign Below	orty by fraud in connection § 152, 1341, 1519, and 357 o pay someone who is NOT	with a bankruptcy case c		nment for up to 20
uzu 165	. IName or person	Turna Otoxstell		Attach Bankruptcy Petition Preparer's Notice, Declar Signature (Official Form 119).	ation, and
Under p	enalty of perjui y are true and o	ry, I declare that I have read correct.	d the summary and sched	lules filed with this declaration and	
X Signatu	TOUS re of Debtor 1	sif.	Signature of Debtor 2		
Date	10-3-17	! 	Date		

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Fill in t	his information to identify	your case:				
Debtor 1	Tavares	D.	Griffin Last Name			
Debtor 2 (Spouse,		Middle Name	Last Name			
	tates Bankruptcy Court for the:					
Case nu (if known					Ε	Check if this is an
			······································		_	amended filing
	al Form 107					
					for Bankruptcy	
informati	on. If more space is need	ed, attach a separa	ried people are filing ate sheet to this for	g together, both are equa m. On the top of any addi	lly responsible for supplyi itional pages, write your na	ng correct ime and case
number ((if known). Answer every q	uestion.				
Part 1	Give Details About	our Marital Sta	tus and Where Y	ou Lived Before		
1. Wha	t is your current marital st	atus?				
	Married					
Ø 1	Not married					
2. Duri	ng the last 3 years, have ye	ou lived anywhere	other than where y	ou live now?		
Ø 1	No /es. List all of the places yoυ	lived in the last 2.	ionro. Do not include			
	Debtor 1:	inved in the rast or	Dates Debtor 1	Debtor 2:		Dates Debtor 2
	DODICE T.		lived there	Desicor 2.		lived there
				Same as Debtor 1		Same as Debtor 1
	Number Street		From	Number Street		From
	Number Street		To	Maurosi 2nser		То
			•••	**************************************		
	City	State ZIP Code	MA.	City	State ZIP Code	
				Same as Debtor 1		Same as Debtor 1
	Number Street	1998/1944 1866 1866 1866 1866 1866 1866 1866 18	From	Number Street		From
			To			To
	MAJA MANA AND AND AND AND AND AND AND AND AND		**			
	City	State ZIP Code		City	State ZIP Code	
3. With state	in the last 8 years, did you s and territories include Ariz	ever live with a spona, California, Ida	oouse or legal equiv	ralent in a community pro la. New Mexico. Puerto Ric	operty state or territory? (Co., Texas, Washington, and	ommunity property Visconsin.)
Ø v	io				,,	
Q Y	es. Make sure you fill out So	chedule H: Your Co	debtors (Official Forr	n 106H).		
	ı					
Part 2:	Explain the Sources	of Your Income				

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4. Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filling a joint case and you have income that you receive together, list it only once under Debtor 1. No Yes. Fill in the details. Debtor 1	Debtor 1	Tavares First Name	D. Middle Name Last	Griffin	Case nu	imber (if known)	**************************************
Fill in the total amount of income you received from all jobs and all businesses. including part-time activities. If you are filing a joint case and you have income that you receive together, filst it only once under Debtor 1. No Yes. Fill in the details. Debtor 1 Debtor 2		, and the same	HINGE HOME Last	Name			
Debtor 1 Sources of Income (Check all that apply) From January 1 of current year until the data you filed for bankruptcy: For last calendar year: (January 1 to December 31, 2015 Operating a business For the calendar year before that: (January 1 to December 31, 2015 Operating a business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support, Social Security, unemployment, and other public benefit payments, pensions, rental income; interest, divided income that you receive any other income each source separately. Do not include income that you listed in line 4. No Yes. Fill in the details. Debtor 1 Debtor 2	Fill If y	in the total amour ou are filing a join	nt of income you receive	d from all jobs and all bus	inesses, including part-ti	me activities.	endar years?
Sources of income Check all that apply From January 1 of current year until the date you filed for bankruptcy: For last calendar year: (January 1 to December 31, 2016			tails.				
Check all that apply characteristics and characteristics and exclusions and exclusions and exclusions and exclusions and exclusions. From January 1 of current year until the date you filed for bankruptcy: Wages, commissions, bonuses, tips Wages, commissions, bonuses, tips Operating a business				Debtor 1		Debtor 2	
benuses, tips Operating a business					(before deductions and		(before deductions and
For last calendar year: (January 1 to December 31, 2016 Operating a business Wages, commissions, bonuses, tips For the calendar year before that: (January 1 to December 31, 2015 Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions, renal income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. Mo Yes. Fill in the details. Debtor 1 Sources of income Describe below. Debtor 2 Sources of income each source sear source source source source. Sources of income each source sear source. Gross income from each source sear source. Sources of income each source. Sources of income each source. Sources of income each source. Sources of income each source. Sources of income each source. Sources of income each source. Sources of income each source. Sources of income each source. Sources of income each source. Sources of income each source. Sources of income each source. Sources of income each source. Sources of income each source. Sources of income each source. Sources of income each source. Sources of income each source. Sources of income each source. Sources of income each source. Sources of income each source. Sources of income each source. Sources of income each source. Sources of income each source. Sources of income each source. Sources of income each source. Sources of income each source. Sources of income each source. Sources of income each source. Sources of income each source. Sources of income each source. Sources of income each source. Sources of income each source. Sources of in				bonuses, tips	\$28,266.50		\$
Containing a business Containing a business Containing a business Containing a business Containing a business Containing a business Containing a business Containing a business Containing a business Containing a business Containing a business Containing a business Containing a business Containing a business Containing a business Containing a business Containing a business Containing a business Containing a business Containing a business Containing a business Containing a business Containing a business Containing a business Containing a business Containing a business Containing a business Containing a business Containing a business Containing a business Containing a business Containing a business Containing a business Containing a business Containing a business Containing a business Containing a business Containing a business Containing a business Containing a business Containing a business Containing a business Containing a business Containing a business Containing a business Containing a business Containing a business Containing a business Containing a business Containing a business Containing a business Containing a business Containing a business Containing a business Containing a business Containing a business Containing a business Containing a business Containing a business Containing a business Containing a business Containing a business Containing a business Containing a business Containing a business Containing a business Containing a business Containing a business Containing a business Containing a business Containing a business Containing a business Containing a business Containing a business Containing a business Containing a business Containing a business Containing a business Containing a business Containing a business Containing a business Containing a business Containing a business Containing a business Containing a business Cont		•		Operating a business		Operating a business	
For the calendar year before that: (January 1 to December 31, 2015 Operating a business		•		\$		\$	
Comparison of the calendar year before that:		(January 1 to De		Operating a business	*	Operating a business	***************************************
S. Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. No No Debtor 1 Sources of income Describe below. Debtor 1 Sources of income from each source (before deductions and exclusions) From January 1 of current year until the date you filed for bankruptcy: \$ \$ \$ \$ \$ \$ For last calendar year: (January 1 to December 31, 2016) \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$		For the calenda	r year before that:	• ,			
5. Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support, Social Security, unemployment, and other public benefit payments; pensions, rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. No Pestor 1 Sources of income Describe below. Debtor 2 Sources of income from each source (before deductions and exclusions) From January 1 of current year until the date you filed for bankruptcy: \$ \$ \$ \$ \$ \$ \$ For last calendar year: (January 1 to December 31, 2016) \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$		(January 1 to De			\$		\$
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Sources of income Describe below. From January 1 of current year until the date you filed for bankruptcy: For last calendar year: (January 1 to December 31, 2016) For the calendar year before that: Sources of income Describe below. Sources of income Descr		Yes. Fill in the det	ails.	Debtor de la Companya de la Companya de la Companya de la Companya de la Companya de la Companya de la Companya de la Companya de la Companya de la Companya de la Companya de la Companya de la Companya de la Companya de la Companya de la Companya de la Companya de la Companya de la Companya de la Companya de la Companya de la Companya de la Companya de la Companya de la Companya de la Companya de la Companya de la Companya de la Companya de la Companya de la Companya de la Companya de la Companya de la Companya de la Companya de la Companya de la Companya de la Companya de la Companya de la Companya de la Companya de la Companya de la Companya de la Companya de la Companya de la Companya de la Companya de la Companya de la Companya de la Companya de la Companya de la Companya de la Companya de la Companya de la Companya de la Companya de la Companya de la Companya de la Companya de la Companya de la Companya de la Companya de la Companya de la Companya de la Companya de la Companya de la Companya de la Companya de la Companya de la Companya de la Companya de la Companya de la Companya de la Companya de la Companya de la Companya de la Companya de la Companya de la Companya de la Companya de la Companya de la Companya de la Companya de la Companya de la Companya de la Companya de la Companya de la Companya de la Companya de la Companya de la Companya de la Companya de la Companya de la Companya de la Companya de la Companya de la Companya de la Companya de la Companya de la Companya de la Companya de la Companya de la Companya de la Companya de la Companya de la Companya de la Companya de la Companya de la Companya de la Companya de la Companya de la Companya de la Companya de la Companya de la Companya de la Companya de la Companya de la Companya de la Companya de la Companya de la Companya de la Companya de la Companya de la Companya de la Companya de la Companya de la Companya de la Companya de la Companya de la Companya de la Companya de la Companya de la Companya de la Companya de la Companya de la Companya		ANTONIA NAMESANA	
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the date you filed for bankruptcy: \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$					each source (before deductions and		each source (before deductions and
the date you filed for bankruptcy: \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$		From January 1	of current vear until		\$		· \$
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ebtor 1	Tavares First Name Middle N	D.	Last Name	Griffin	_ Case	number (if known)	
Part 3:	List Certain Payr	ments You	Made Befo	re You Filed	l for Bankruptcy		
s. Are eiti	her Debtor 1's or Del	btor 2's det	ots primarily c	onsumer deb	rts?		
☐ No.	"incurred by an indi-	vidual prima	rily for a persor	nal, family, or i	household purpose."	re defined in 11 U.S.C. § 10	1(8) as
			iled for bankru	ptcy, did you p	eay any creditor a total of	\$6,425* or more?	
	No. Go to line 7.						
	total amour	nt you paid t	hat creditor. D	o not include p	\$6,425* or more in one payments for domestic si ments to an attorney for	or more payments and the upport obligations, such as this bankruptcy case.	
						ifter the date of adjustment.	
🗹 Yes	s. Debtor 1 or Debtor	2 or both h	ave primarily	consumer de	obts.		
	During the 90 days I	before you fi	led for bankru	otcy, did you p	ay any creditor a total of	\$600 or more?	
	No. Go to line 7.						
	creditor, Do	o not include	payments for	domestic supp	\$600 or more and the to port obligations, such as ey for this bankruptcy ca	otal amount you paid that child support and se.	
				Dates of payment	Total amount paid	Amount you still owe	Was this payment for
	Creditor's Name		MANAGE TO SERVICE THE SERVICE THE SERVICE THE SERVICE THE SERVICE THE SERVICE THE SERVICE THE SERVICE THE SERVICE THE SERVICE THE SERVICE THE SERVICE THE SERVICE THE SERVICE THE SERVICE THE SERVICE THE SERVICE THE SERVICE THE SERVICE THE SERVICE THE SERVICE THE SERVICE THE SERVICE THE SERVICE THE SERVICE THE SERVICE THE SERVICE THE SERVICE THE SERVICE THE SERVICE THE SERVICE THE SERVICE THE SERVICE THE SERVICE THE SERVICE THE SERVICE THE SERVICE THE SERVICE THE SERVICE THE SERVICE THE SERVICE THE SERVICE THE SERVICE THE SERVICE THE SERVICE THE SERVICE THE SERVICE THE SERVICE THE SERVICE THE SERVICE THE SERVICE THE SERVICE THE SERVICE THE SERVICE THE SERVICE THE SERVICE THE SERVICE THE SERVICE THE SERVICE THE SERVICE THE SERVICE THE SERVICE THE SERVICE THE SERVICE THE SERVICE THE SERVICE THE SERVICE THE SERVICE THE SERVICE THE SERVICE THE SERVICE THE SERVICE THE SERVICE THE SERVICE THE SERVICE THE SERVICE THE SERVICE THE SERVICE THE SERVICE THE SERVICE THE SERVICE THE SERVICE THE SERVICE THE SERVICE THE SERVICE THE SERVICE THE SERVICE THE SERVICE THE SERVICE THE SERVICE THE SERVICE THE SERVICE THE SERVICE THE SERVICE THE SERVICE THE SERVICE THE SERVICE THE SERVICE THE SERVICE THE SERVICE THE SERVICE THE SERVICE THE SERVICE THE SERVICE THE SERVICE THE SERVICE THE SERVICE THE SERVICE THE SERVICE THE SERVICE THE SERVICE THE SERVICE THE SERVICE THE SERVICE THE SERVICE THE SERVICE THE SERVICE THE SERVICE THE SERVICE THE SERVICE THE SERVICE THE SERVICE THE SERVICE THE SERVICE THE SERVICE THE SERVICE THE SERVICE THE SERVICE THE SERVICE THE SERVICE THE SERVICE THE SERVICE THE SERVICE THE SERVICE THE SERVICE THE SERVICE THE SERVICE THE SERVICE THE SERVICE THE SERVICE THE SERVICE THE SERVICE THE SERVICE THE SERVICE THE SERVICE THE SERVICE THE SERVICE THE SERVICE THE SERVICE THE SERVICE THE SERVICE THE SERVICE THE SERVICE THE SERVICE THE SERVICE THE SERVICE THE SERVICE THE SERVICE THE SERVICE THE SERVICE THE SERVICE THE SERVICE THE SERVICE THE SERVICE THE SERVICE THE SERVICE THE SERVICE THE SERVICE THE SERVICE THE SERVICE		\$	\$	☐ Mortgage
	Cleditor's Name						Car
	Number Street			***************************************			Credit card
							Loan repayment
							Suppliers or vendors
	City	State	ZIP Code				Other
	Creditor's Name			·····	\$	\$	☐ Mortgage
							☐ Car ☐ Credit card
	Number Street						Loan repayment
				***************************************			Suppliers or vendors
	City	State	ZIP Code				Other
	ON,	Oldia	Zii Code				
	Creditor's Name			*	\$	<u>\$</u>	☐ Mortgage
							☐ Car
	Number Street						Credit card
							☐ Loan repayment☐ Suppliers or vendors
	Warning to which the table						Other
	City	State	ZIP Code				was Outel

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Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are an agencial partner or opporations of which you are an agencial partner or opporations of which you are an agencial partner or opporations of which you are an agencial partner or opporations, and with your area agencial partner or opporations of which you are an agencial partner or opporations, and accounts a child support and alimony. Value Description Desc	btor 1	Tavares		D.	Griffin	_	Case number (if known)	1
Insider's include your relatives; any general partners; relatives of any general partners; partnerships of which you are an enforce, director, person in control, or owner of 20% or more of their volvine you are an ada any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. \$ 101. Include payments for domestic support obligations, such as child support and alimony. ✓ No ✓ Yes. List all payments to an insider. Dates of payment Amount Amount you still. Reason for this payment payment. State ZPF Code Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefit an insider? Include payments on debts guaranteed or cosigned by an insider. ✓ No ✓ Yes. List all payments that benefited an insider. City State City State City State City State ZiP Code Same Same Number Street		First Name	Middle Name	Last	Name			
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Dates of Payment paid Amount you still Reason for this payment over Street Power Payment Paid Payment Payment Payment								
Payment Paid owe	Q Y	es. List all payr	nents to an ins	ider.				
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Insider's Name Street State ZIP Code		City		State 7/P	Code			
Number Street City State ZIP Code Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefit an insider? Include payments on debts guaranteed or cosigned by an insider. Insider Street Dates of Total amount Amount you still Reason for this payment own insider. Dates of Total amount Amount you still Reason for this payment nown include creditor's name Insider's Name Number Street Number Street Number Street Number Street			·					
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an insider? Include payments on debts guaranteed or cosigned by an insider. ✓ No ☐ Yes. List all payments that benefited an insider. ☐ Dates of payment paid Amount you still owe Include creditor's name ☐ Number Street ☐ City State ZIP Code ☐ Number Street ☐ Number Street ☐ Number Street ☐ Number Street ☐ Number Street ☐ S S S S S S S S S S S S S S S S S S S	i	City	S	itale ZIP	Code			
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Dates of payment paid owe Reason for this payment include creditor's name Insider's Name			-		,			
payment paid owe Include creditor's name	□ Y6	es. List all paym	ents that bene	efited an in				
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Debtor 1	Tavares	D.	Griffin	Case number (if known)		
	First Name	Middle Name Last Name		America,		
Part 4	Identify Le	gal Actions, Repossessi	ons, and Foreciosur	ac.		
	28 <u> </u>					
9. VVILIS	ill i year before	you med for pankruptcy, w including personal injury case	ere you a party in any i	awsuit, court action, or adminis divorces, collection suits, paternity	trative proc	eeding? Sood or custody modificatio
	contract disputes		o, ornar olarno actiono,	utvorces, conection suits, paternity	actions, sup	port of custody modificant
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	io es. Fill in the det	oilo				
Annual I	cs. Fai artife dei			-		
		Nat	ure of the case	Court or agency		Status of the case
						p
4	Case title			Court Name	***************************************	Pending
						On appeal
•				Number Street	~~~	Concluded
(Case number					
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(Case number	W1-11-11-11-11-11-11-11-11-11-11-11-11-1				
				City State	ZIP Code	
Ŭ Y€	es. Fill in the info	rmation below.	Describe the prope	rty	Date	Value of the property
						\$
	Creditor's Name				***************************************	Ψ
	Number Stree	l	Explain what happe	ned		
			Property was	repossessed.		
			Property was	-		
			Property was			
	City	State ZIP Code		attached, seized, or levied.		
			Describe the proper	tv	Date	Value of the property
			Boodings the proper	•	Date	value of the property
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	Creditor's Name					
	Number Street		Explain what happe	ned		
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	~~~	· · · · · · · · · · · · · · · · · · ·	Property was			
			Property was			
	City	State 7IP Code	— Property was	garnished.		

Property was attached, seized, or levied.

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Pi- 4 9 h	D.	<u>Griffin</u>	Case number (if known)	
First Name Middle i	Name Last	Name		
ithin 90 days before you counts or refuse to make	i filed for bankru	ptcy, did any creditor, including a bar cause you owed a debt?	nk or financial institution, set off any a	mounts from you
No	te a payment bet	ause you owed a debt?		
Yes. Fill in the details.				
roo. I sit iir tire details.				
		Describe the action the creditor took	Date action	Amount
Creditor's Name		-	was taken	
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City	State ZIP Code	The state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the s		
Oity	State ZIP Code	Last 4 digits of account number: XXX	XX	
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tnin 1 year before you fi editors: a court-annointe	iled for bankrupte	cy, was any of your property in the po stodian, or another official?	ossession of an assignee for the benef	it of
No	ou roodivor, a out	stodiali, or allower official:		
Yes				
5) List Certain Gifts	s and Contribu	tions		
thin 2 years hafara you f	filad far honkruni	four did wan aiwa anu aifta with a tatal	i value of many they come as many	
	filed for bankrup	tcy, did you give any gifts with a total	I value of more than \$600 per person?	
No		tcy, did you give any gifts with a total	I value of more than \$600 per person?	
thin 2 years before you f No Yes. Fill in the details for		tcy, did you give any gifts with a total	I value of more than \$600 per person?	
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No	r each gift.	tcy, did you give any gifts with a total  Describe the gifts	I value of more than \$600 per person?  Dates you gave the gifts	Value
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tor 1	Tavares First Name	Middle Name	D.	Griffin st Name	Case number (if known)			
Vithi	in 2 years befor	e you filed f	or bankru	ptcy, dìd you give any gifts or co	ontributions with a total valu	e of more than \$6	i00 to any	charity?
ZÍ N								
<b>)</b> Y	es. Fill in the de	ails for each	gift or cor	ntribution.				
	Gifts or contribut	ons to charit	ies	Describe what you contributed		Date you	Value	
	that total more th	an \$600		•		contributed		
ĉ	harity's Name	····		-			\$	
	······································							
				-		***********	\$	
N	umber Street							
Ci	ity State	ZIP Code		•				
t 6:	List Certa	in Losses						
							*****************	
N <b>E</b>	o es. Fill in the det	ails.						
	Describe the prop how the loss occu		and	Describe any insurance coverage Include the amount that insurance had claims on line 33 of Schedule A/B: if	nas paid. List pending insurance	Date of your loss	Value of lost	f property
							\$	
	2							
7:	List Certain	Payment	s or Tran	sfers				
Vithi	n 1 year before	you filed fo	r bankrup	tcy, did you or anyone else actin	g on your behalf pay or trans	sfer any property	to anyon	0
				or preparing a bankruptcy petitio			-	
		рапктиртсу	petition pr	eparers, or credit counseling agend	cles for services required in yo	ur bankruptcy.		
N C Ye	o es. Fill in the deta	ails.						
	001 Debtorcc Person Who Was Paid			Description and value of any prop	perty transferred	Date payment or transfer was made	Amount	of payment
	372 Summit			Credit Counseling Certific	ate			
	Number Street		Allene Western Levennen.	-		09/29/2017	\$	14.95
- ل	ersey City	NJ	07306			Technologies de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya de la companya della companya della companya de la companya della co	\$	
	City		ZIP Code					
	vww.001debto							
Ë	erson Who Made the	Payment if Not	You					

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otor 1	Tavares		D	Griffin	Case number (if known)			
	First Name	Middle Name	Last	Name	denna.			
				Description and value of any prope	erty transferred	Date payment or	Amoun	f of
					•	transfer was made	paymer	
	Tania Stoxstel	<u> </u>		Bankruptcy Petition Prepar	ror.			
				bankiupicy retition riepai	ਰ।	09/25/2017	e	100.0
	1426 Douglas Number Street	Lane				00/2017	ф	100.
	Mulliper Safet						_	
							\$	
	Crete	IL	60417					
	City	State	ZIP Code					
	tstoxstell@yaho			-				
	Email or website addres	is						
	Person Who Made the F							
With	nin 1 year before y	ou filed t	for bankrupt	cy, did you or anyone else acting	on your behalf pay or tran	sfer any property t	o anyone	who
pror	nised to help you	deal with	ı your credit	ors or to make payments to your	creditors?			
Do r	not include any pay	ment or tr	ansfer that yo	ou listed on line 16.				
M 1	No.							
	∕es. Fill in the detai	ils.						
				Description and value of any prope	rfy transferred	Date payment or transfer was	Amount o	of payme
	Person Who Was Paid					made		
	Person vyno vyas Paid							
	Number Street		·····				\$	
	Transcr Gauce							
	***************************************						<b>\$</b>	
	City	State	ZIP Code				·	
M. 874 S.	-							
rand Nigh	in 2 years before	you nied	tor bankrup	tcy, did you sell, trade, or otherw pusiness or financial affairs?	ise transfer any property t	o anyone, other tha	in proper	ty
ndu	sierreu in me orui de both outright tra	nefere an	r <b>se ot your c</b> ut transfere m	pusiness or financial affairs? lade as security (such as the grantin	an of a popurity interact or m			
Do n	ot include gifts and	transfers	that you hav	e already listed on this statement.	ig or a security interest or m	origage on your prop	peny).	
ZÍN	la		. that you have	o arousy noted on the statement.				
	es. Fill in the detai	ls						
	or minimum action							
				Description and value of property transferred	Describe any property of or debts paid in exchar		Date t	transfer
					or deota paid in exertai	.Ac	wasi	Haue
	Person Who Received To	ransfer						
	N							·····
	Number Street							
	ann.							
	City	State	ZIP Code					
	Person's relationship	to you						
	·		······					
	Person Who Received Tr	anefor	<del></del>					
	. Crado vivio nacemed ()	WIGIDE						
i	Number Street		~~~					
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•	**************************************							
;	City	State	7ID Cod-					
	•		ZIP Code					
	Person's relationship	to you						

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Debtor 1	Tavares First Name	D.	Griffin	Case number (##	nown)	
	rest name	Middle Name	Last Name			
19. <b>With</b>	hin 10 years bei	fore you filed for bar	nkruptcy, did you transfer any prope	rty to a self-settled tru	ıst or similar device of v	which you
		(These are often calle	ed asset-protection devices.)			
2		- A - M -				
<u></u>	Yes. Fill in the d	etails.				
			Description and value of the prop	erty transferred		Date transfer
						was made
ı	Name of trust					******
						•
-						
Part 8	d Het Cartai	m Simonolal Acco.	unts, instruments, Safe Deposit			
					***************************************	
			ruptcy, were any financial accounts	or instruments held in	your name, or for your	benefit,
		d, or transferred? savings. monev mar	ket, or other financial accounts; cert	ificates of denosity sh	aras in hanks cradit ur	nione
brol	kerage houses,	pension funds, coo	peratives, associations, and other fi	nancial institutions.	aroo in sanita, ordan ar	110tt <b>y</b> ,
M I						
<b>!!</b> \	Yes. Fill in the o	details.				
			Last 4 digits of account number	Type of account or instrument	Date account was	Last balance before
				instrument	closed, sold, moved, or transferred	closing or transfer
	Name of Financial	institution	XXXX	Checking		<b>s</b>
	Number Street			☐ Savings		<b>V</b>
	Wallet Oxfor			Money market		
			NA-Andreas	☐ Brokerage		
	City	State ZIP Code	<del></del>	Other		
	Atana - A Pina - 1111	-444	XXXX	Checking		\$
	Name of Financial I	nsutution		☐ Savings		
	Number Street		- Annual Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of the Control of t	Money market		
		*		☐ Brokerage		
				Other		
	City	State ZIP Code	<del></del>			
		or did you have with	in 1 year before you filed for bankrup	otcy, any safe deposit	box or other depositor	/ for
Ø №		Other Valuables!				
Q Y	es. Fill in the d	etails.				
			Who else had access to it?	Describe th	ne contents	Do you still have it?
						□ No
	Name of Financial I	nstitution	Maria			☐ Yes
	wr . maniwidi fi		Name			
	Number Street		Number Street	**************************************		
			<del></del>			
		2400044 1000 LLVI	City State ZIP Code	***************************************		
	City	State ZIP Code	WALLES AND AND AND AND AND AND AND AND AND AND			

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btor 1	Tavares	<u>D</u> .	Griffin	Case number (if known)	
	First Name Middle	Name Last Name			
Have	vou stored property i	n a storage unit or plac	e other than your home	within 1 year before you filed for bankruptcy	?
EÚ N	lo		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	The state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the s	•
Q Y	es. Fill in the details.				
		Who	else has or had access to	it? Describe the contents	Do you sti have it?
					☐ No
	Name of Storage Facility	Nami	)	mak-erre dahaksi angrapaksi palapaksi erre dapaksi.	Yes
	Number Street	Num	ber Street	NOTIFICATION SEALANT CARACTER STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE STATE	
		Citys	State ZIP Code		
	City	State ZiP Code			
T6 9	Identify Prope	rty You Hold or Cor	itrol for Someone Els	<b>60</b>	
. Do v	ou hold or control an	v property that someon	e else owns? Include ar	ny property you borrowed from, are storing fo	^r
	old in trust for someo		o oloo ollilo: molaao al	y property you believed from, are storing to	~,
Ø 1	<b>l</b> o				
_	es. Fill in the details.				
		When	e is the property?	Describe the property	Value
		******	T to the property.	boother are property	value
	Owner's Name				\$
	Number Street	Numbe	r Street	**************************************	
	Number Street				
	***************************************				
	City 8	City	State	ZIP Code	
ine il	Give Details A	bout Environmental	Information		
r the	purpose of Part 10. th	e following definitions	apply:		
	• •		· · · •	n concerning pollution, contamination, releas	oe of
haza	rdous or toxic substa	nces, wastes, or mater	ial into the air, land, soil	l, surface water, groundwater, or other medit nces, wastes, or material.	im,
		acility, or property as d perate, or utilize it, incl		nmental law, whether you now own, operate,	, or
				azardous waste, hazardous substance, toxic	
		terial, pollutant, contan			
nort :	all notices releases :	and proceedings that v	nii know ahout regardle	ss of when they occurred.	
			-	·	
		i nouneu you inat you i	nay be nable of potentia	Ily liable under or in violation of an environm	entai iäW?
Ø N					
QY	es. Fill in the details.				
		Gove	rnmental unit	Environmental law, if you know it	Date of notice
				•	
N	ame of site	Govern	mental unit	and the second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second s	<del></del>
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ō	ity Sta	te ZIP Code			
~		5040			

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btor 1	Tavares	D.	Griffin st Name	Case number (if known)		
	First 14dine Mills	ole Mante La	st ivane			
25. Hav	e you notified any go	overnmental unit	of any release of hazardous mater	ial?		
M	No					
	Yes. Fill in the detail	ls.				
			Governmental unit	Environmental law, if you know it	Date of notice	
	Al		•	<b></b>		
	Name of site		Governmental unit	_	***************************************	
	Number Street		Number Street	-		
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	City	State ZIP Code	<u> </u>			
	City	State ZIP Code				
.Hav	e you been a party in	any judicial or a	dministrative proceeding under ar	ny environmental law? Include settlement	s and orders.	
Ø	No					
	Yes. Fill in the detail	s.				
			Court or agency	Nature of the case	Status of the	
			• •		case	
	Case title		Court Name	<del></del>	Pending	
			Court Hame		On appeal	
		***************************************	Number Street		Q Concluded	
	Case number			STATEMENT AND ADDRESS OF THE STATEMENT AND ADDRESS OF THE STATEMENT AND ADDRESS OF THE STATEMENT AND ADDRESS OF THE STATEMENT AND ADDRESS OF THE STATEMENT AND ADDRESS OF THE STATEMENT AND ADDRESS OF THE STATEMENT AND ADDRESS OF THE STATEMENT AND ADDRESS OF THE STATEMENT AND ADDRESS OF THE STATEMENT AND ADDRESS OF THE STATEMENT AND ADDRESS OF THE STATEMENT AND ADDRESS OF THE STATEMENT AND ADDRESS OF THE STATEMENT AND ADDRESS OF THE STATEMENT AND ADDRESS OF THE STATEMENT AND ADDRESS OF THE STATEMENT AND ADDRESS OF THE STATEMENT AND ADDRESS OF THE STATEMENT AND ADDRESS OF THE STATEMENT AND ADDRESS OF THE STATEMENT AND ADDRESS OF THE STATEMENT AND ADDRESS OF THE STATEMENT AND ADDRESS OF THE STATEMENT AND ADDRESS OF THE STATEMENT AND ADDRESS OF THE STATEMENT AND ADDRESS OF THE STATEMENT AND ADDRESS OF THE STATEMENT AND ADDRESS OF THE STATEMENT AND ADDRESS OF THE STATEMENT AND ADDRESS OF THE STATEMENT AND ADDRESS OF THE STATEMENT AND ADDRESS OF THE STATEMENT AND ADDRESS OF THE STATEMENT AND ADDRESS OF THE STATEMENT AND ADDRESS OF THE STATEMENT AND ADDRESS OF THE STATEMENT AND ADDRESS OF THE STATEMENT AND ADDRESS OF THE STATEMENT AND ADDRESS OF THE STATEMENT AND ADDRESS OF THE STATEMENT AND ADDRESS OF THE STATEMENT AND ADDRESS OF THE STATEMENT AND ADDRESS OF THE STATEMENT AND ADDRESS OF THE STATEMENT AND ADDRESS OF THE STATEMENT AND ADDRESS OF THE STATEMENT AND ADDRESS OF THE STATEMENT AND ADDRESS OF THE STATEMENT AND ADDRESS OF THE STATEMENT AND ADDRESS OF THE STATEMENT AND ADDRESS OF THE STATEMENT AND ADDRESS OF THE STATEMENT AND ADDRESS OF THE STATEMENT AND ADDRESS OF THE STATEMENT AND ADDRESS OF THE STATEMENT AND ADDRESS OF THE STATEMENT AND ADDRESS OF THE STATEMENT AND ADDRESS OF THE STATEMENT AND ADDRESS OF THE STATEMENT AND ADDRESS OF THE STATEMENT AND ADDRESS OF THE STATEMENT AND ADDRESS OF THE STATEMENT AND ADDRESS OF THE STATEMENT AND ADDRESS OF THE STATEMENT AND ADDRESS OF THE STATEMENT AND ADDRESS OF THE STATEMENT AND ADDRESS OF THE STATEMENT AND ADDRESS OF THE STATEMENT AND ADDRESS OF THE STATEMENT AND AD		
			City State ZIP Co	de		
ואנו	Cive Details	About Vour Ri	isiness or Connections to An	e Metalenava		
			······································	have any of the following connections to a	my hysinges?	
			i in a trade, profession, or other a		illy business i	
			npany (LLC) or limited liability part			
	A partner in a par					
	An officer, direct	or, or managing e	executive of a corporation			
	An owner of at le	ast 5% of the vot	ing or equity securities of a corpo	ration		
T.Á	No. None of the abov	uo anniine Go to	Dark 12			
			ll in the details below for each bus	siness.		
		<b>, , , , , , , , , , , , , , , , , , , </b>	Describe the nature of the busine		number	
	Business Name		ma.	Do not include Social Se	curity number or ITIN.	
	DUSTINGS WATER			EIN:		
	Number Street		MMA		<del> </del>	
			Name of accountant or bookkeep	er Dates business existed		
			uv-	From To		
	City	State ZIP Code	<del></del>	***************************************		
			Describe the nature of the busine	ss Employer Identification	number	
	Business Name		_	Do not include Social Se	Do not include Social Security number or ITIN.	
			_	EIN:		
	Number Street		Name of accountant or bookkeep			
	***************************************	***************************************				
				From To		
		Dist. Tip O. I.	_		<del></del>	

Case 17-29738 Doc 1 Filed 10/04/17 Entered 10/04/17 10:59:36 Desc Main Page 50 of 52 Document Tavares Griffin Debtor 1 Case number (if known) Employer Identification number Describe the nature of the business Do not include Social Security number or ITIN. Business Name Number Street Name of accountant or bookkeeper Dates business existed _ To __ State ZIP Code 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. MO No Yes. Fill in the details below. Date issued Name MM / DD / YYYY Number Street City ZIP Code Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Signature of Debtor 1 Signature of Debtor 2 Date Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? Ø No Yes

✓ Yes. Name of person Tania Stoxstell

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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Fill in this inf	formation to ide	entify your case:		
Debtor 1	Tavares First Name	D. Middle Name	Griffin Last Name	
Debtor 2 (Spouse, if filing)	First Name			
•		Middle Name or the: Northern District of II	Last Name	
Case number	sandupicy Court to	or the. Northern District of the	INOIS	
(If known)	411137444			
<del></del>				

#### Official Form 108

#### Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- m creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

#### Carrain List Your Creditors Who Have Secured Claims

Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the propert as exempt on Schedule C
Creditor's name: Ally Financial	☑ Surrender the property.	□ No
Description of Course	Retain the property and redeem it.	<b>☑</b> Yes
Description of 2013 Dodge Charger property securing debt:	Retain the property and enter into a Reaffirmation Agreement.	
	Retain the property and [explain]:	
Creditor's	☐ Surrender the property.	□ No
name:	Retain the property and redeem it.	☐ Yes
Description of property securing debt:	Retain the property and enter into a Reaffirmation Agreement.	Latres
	Retain the property and [explain]:	
Creditor's name:	☐ Surrender the property.	□ No
	Retain the property and redeem it.	☐ Yes
Description of property securing debt:	Retain the property and enter into a Reaffirmation Agreement.	<b>***</b> 100
	Retain the property and [explain]:	
Creditor's name:	☐ Surrender the property.	□ No
	Retain the property and redeem it.	☐ Yes
Description of property securing debt:	Retain the property and enter into a Reaffirmation Agreement.	•••
	Retain the property and [explain]:	

ain

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		Document	Page 52 of 52	

Griffin Tavares Debtor 1 Case number (If known) **List Your Unexpired Personal Property Leases** Part 28 For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2). Describe your unexpired personal property leases Will the lease be assumed? Lessor's name: Rose Campbell ☐ No Yes Yes Description of leased Residential Apartment Lease property: Lessor's name: ☐ No ☐ Yes Description of leased property: Lessor's name: □ No Yes Description of leased property: Lessor's name: ☐ No ☐ Yes Description of leased property: Lessor's name: ☐ No Q Yes Description of leased property: Lessor's name: Q No Q Yes Description of leased property: Lessor's name: O No Yes Description of leased property: Part 3: Sign Below

Under penalty of perjury, I declare that I have indicated my intention about any property of my estate that secures a debt and any personal property that is subject to an unexpired lease.

Signature of Debtor 1 Signature of Debtor 2 MM/ DD/ YYYY